

AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT		1. CONTRACT ID CODE		PAGE OF PAGES 1 3	
2. AMENDMENT/MODIFICATION NO. P00008		3. EFFECTIVE DATE See Block 16C		4. REQUISITION/PURCHASE REQ. NO. 192118FEP00000029	
6. ISSUED BY ICE/DCR		7. ADMINISTERED BY (If other than Item 6) ICE/DCR		5. PROJECT NO. (If applicable)	
ICE/DETENTION COMPLIANCE REMOVALS IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 801 I STREET NW SUITE WASHINGTON DC 20536		ICE/DETENTION COMPLIANCE REMOVALS IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 801 I STREET NW SUITE WASHINGTON DC 20536			
8. NAME AND ADDRESS OF CONTRACTOR (No., street, county, State and ZIP Code) COUNTY OF OTERO 26 MCGREGOR RANGE RD CHAPARRAL NM 880817753		9A. AMENDMENT OF SOLICITATION NO. 9B. DATED (SEE ITEM 11) 10A. MODIFICATION OF CONTRACT/ORDER NO. EROIGSA-14-0001, HSCEDM-17-F-IG138 10B. DATED (SEE ITEM 13) 03/20/2017			
CODE 8290769130000		FACILITY CODE			

11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS

☐ The above numbered solicitation is amended as set forth in Item 14. The hour and date specified for receipt of Offers ☐ is extended. ☐ is not extended.
Offers must acknowledge receipt of this amendment prior to the hour and date specified in the solicitation or as amended, by one of the following methods: (a) By completing Items 8 and 15, and returning _____ copies of the amendment; (b) By acknowledging receipt of this amendment on each copy of the offer submitted; or (c) By separate letter or telegram which includes a reference to the solicitation and amendment numbers. FAILURE OF YOUR ACKNOWLEDGEMENT TO BE RECEIVED AT THE PLACE DESIGNATED FOR THE RECEIPT OF OFFERS PRIOR TO THE HOUR AND DATE SPECIFIED MAY RESULT IN REJECTION OF YOUR OFFER. If by virtue of this amendment you desire to change an offer already submitted, such change may be made by telegram or letter, provided each telegram or letter makes reference to the solicitation and this amendment, and is received prior to the opening hour and date specified.

12. ACCOUNTING AND APPROPRIATION DATA (If required)

See Schedule

Net Increase:

13. THIS ITEM ONLY APPLIES TO MODIFICATION OF CONTRACTS/ORDERS. IT MODIFIES THE CONTRACT/ORDER NO. AS DESCRIBED IN ITEM 14.

CHECK ONE	A. THIS CHANGE ORDER IS ISSUED PURSUANT TO: (Specify authority) THE CHANGES SET FORTH IN ITEM 14 ARE MADE IN THE CONTRACT ORDER NO. IN ITEM 10A.
	B. THE ABOVE NUMBERED CONTRACT/ORDER IS MODIFIED TO REFLECT THE ADMINISTRATIVE CHANGES (such as changes in paying office, appropriation date, etc.) SET FORTH IN ITEM 14, PURSUANT TO THE AUTHORITY OF FAR 43.103(b).
	C. THIS SUPPLEMENTAL AGREEMENT IS ENTERED INTO PURSUANT TO AUTHORITY OF:
X	D. OTHER (Specify type of modification and authority) Unilateral Funding Modification

E. IMPORTANT: Contractor ☒ is not. ☐ is required to sign this document and return _____ copies to the issuing office.

14. DESCRIPTION OF AMENDMENT/MODIFICATION (Organized by UCF section headings, including solicitation/contract subject matter where feasible.)

DUNS Number: 829076913

Field Office Point of Contact: (b)(6),(b)(7)(C) 915-856-(b)(6),(b)(7)(C)

Alternate Field Office POC: (b)(6),(b)(7)(C) 915 856-(b)(6),(b)(7)(C)

Contracting Officer's Representative (COR): (b)(6),(b)(7)(C) 915) (b)(6),(b)(7)(C)

Alternate COR: (b)(6),(b)(7)(C) 915) 834-4818

Contracting Officer: (b)(6),(b)(7)(C) (202) 732-(b)(6),(b)(7)(C)

Contract Specialist: (b)(6),(b)(7)(C) (202) 732-(b)(6),(b)(7)(C)

This modification to the FY 17 Task Order is to provide additional funding for detention services for ICE detainees at the Otero County Processing Center under the provisions of the Otero County, New Mexico Intergovernmental Service Agreement (IGSA) EROIGSA-14-0001. Continued ...

Except as provided herein, all terms and conditions of the document referenced in Item 9 A or 10A, as heretofore changed, remains unchanged and in full force and effect.

15A. NAME AND TITLE OF SIGNER (Type or print)		16A. NAME AND TITLE OF CONTRACTING OFFICER (Type or print)	
15B. CONTRACTOR/OFFEROR		15C. DATE SIGNED	
(Signature of person authorized to sign)			

CONTINUATION SHEET

REFERENCE NO. OF DOCUMENT BEING CONTINUED

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NAME OF OFFEROR OR CONTRACTOR

COUNTY OF OTERO

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>The purpose of this modification is as follows:</p> <p>A. Provide funding in the amount of (b)(4) for Detention Services (CLIN 0001A).</p> <p>B. As a result, the obligated amount of this Task Order has increased:</p> <p>From: (b)(4)</p> <p>By: \$</p> <p>To: \$</p> <p>The funding provided in this modification is the amount presently available for payment and allotted to this task order. The service provider agrees to perform to the point that does not exceed the total amount currently allotted to the items currently funded under this task order. The service provider is not authorized to continue to work on those item(s) beyond that point. The Government will not be obligated to reimburse the service provider in excess of the amount allotted to those item(s) for performance beyond the funding allotted.</p> <p>*****</p> <p>Exempt Action: Y Sensitive Award: SPII</p> <p>FOB: Destination</p> <p>Period of Performance: 02/01/2017 to 01/31/2018</p> <p>Change Item 0001a to read as follows (amount shown is the total amount):</p> <p>0001a Detention Services</p> <p>Bed Day Rate of (b)(4) as of October 3, 2017 and stated on P00009 of contract EROIGSA-14-0001.</p> <p>The amount for this CLIN has increased</p> <p>From: (b)(4)</p> <p>By: \$</p> <p>To: \$</p> <p>The quantity for this CLIN has increased:</p> <p>From: (b)(4)</p> <p>By: \$</p> <p>To: \$</p> <p>Accounting Info:</p> <p>(b)(7)(E)</p> <p>Continued ...</p>				7,242,843.18

NAME OF OFFEROR OR CONTRACTOR
COUNTY OF OTERO

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	Funded: \$0.00 Accounting Info: (b)(7)(E)				
	Funded: \$0.00 Accounting Info: (b)(7)(E)				
	Funded (b)(4) ***** All terms and conditions remain the same				

AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT		1. CONTRACT ID CODE		PAGE OF PAGES	
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2. AMENDMENT/MODIFICATION NO. P00010		3. EFFECTIVE DATE See Block 16C		4. REQUISITION/PURCHASE REQ. NO. 192118FEP00000058.1	
5. PROJECT NO. (If applicable)					
6. ISSUED BY CODE ICE/DCR		7. ADMINISTERED BY (If other than Item 6) CODE ICE/DCR			
ICEDETENTION COMPLIANCE REMOVALS IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 801 I STREET NW SUITE (b)(6);(b)(7)(C) WASHINGTON DC 20536		ICEDETENTION COMPLIANCE REMOVALS IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 801 I STREET NW SUITE (b)(6);(b)(7)(C) WASHINGTON DC 20536			
8. NAME AND ADDRESS OF CONTRACTOR (No., street, county, State and ZIP Code)		(x) 9A. AMENDMENT OF SOLICITATION NO.			
COUNTY OF OTERO 26 MCGREGOR RANGE RD CHAPARRAL NM 880817753		9B. DATED (SEE ITEM 11)			
		x 10A. MODIFICATION OF CONTRACT/ORDER NO. EROIGSA-14-0001, HSCEDM-17-F-IG138			
		10B. DATED (SEE ITEM 13) 03/20/2017			
CODE 8290769130000		FACILITY CODE			
11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS					
<input type="checkbox"/> The above numbered solicitation is amended as set forth in Item 14. The hour and date specified for receipt of Offers <input type="checkbox"/> is extended. <input type="checkbox"/> is not extended. Offers must acknowledge receipt of this amendment prior to the hour and date specified in the solicitation or as amended, by one of the following methods: (a) By completing Items 8 and 15, and returning _____ copies of the amendment; (b) By acknowledging receipt of this amendment on each copy of the offer submitted; or (c) By separate letter or telegram which includes a reference to the solicitation and amendment numbers. FAILURE OF YOUR ACKNOWLEDGEMENT TO BE RECEIVED AT THE PLACE DESIGNATED FOR THE RECEIPT OF OFFERS PRIOR TO THE HOUR AND DATE SPECIFIED MAY RESULT IN REJECTION OF YOUR OFFER. If by virtue of this amendment you desire to change an offer already submitted, such change may be made by telegram or letter, provided each telegram or letter makes reference to the solicitation and this amendment, and is received prior to the opening hour and date specified. (b)(7)(E)					
12. ACCOUNTING AND APPROPRIATION DATA (If required) Net Increase: (b)(7)(E)					
See Schedule					
13. THIS ITEM ONLY APPLIES TO MODIFICATION OF CONTRACTS/ORDERS. IT MODIFIES THE CONTRACT/ORDER NO. AS DESCRIBED IN ITEM 14.					
CHECK ONE	A. THIS CHANGE ORDER IS ISSUED PURSUANT TO: (Specify authority) THE CHANGES SET FORTH IN ITEM 14 ARE MADE IN THE CONTRACT ORDER NO. IN ITEM 10A.				
	B. THE ABOVE NUMBERED CONTRACT/ORDER IS MODIFIED TO REFLECT THE ADMINISTRATIVE CHANGES (such as changes in paying office, appropriation date, etc.) SET FORTH IN ITEM 14, PURSUANT TO THE AUTHORITY OF FAR 43.103(b).				
	C. THIS SUPPLEMENTAL AGREEMENT IS ENTERED INTO PURSUANT TO AUTHORITY OF:				
X	D. OTHER (Specify type of modification and authority) Unilateral Funding Modification				
E. IMPORTANT: Contractor <input checked="" type="checkbox"/> is not. <input type="checkbox"/> is required to sign this document and return _____ copies to the issuing office.					
14. DESCRIPTION OF AMENDMENT/MODIFICATION (Organized by UCF section headings, including solicitation/contract subject matter where feasible.)					
DUNS Number: 829076913					
Field Office Point of Contact: (b)(6);(b)(7)(C) 15-856-(b)(6);(b)(7)(C)					
Alternate Field Office POC (b)(6);(b)(7)(C) 915 856-1 (b)(6);(b)(7)(C)					
Contracting Officer's Representative (CO) (b)(6);(b)(7)(C) 915) 834- (b)(6);(b)(7)(C)					
Alternate COR: (b)(6);(b)(7)(C) (915) 834- (b)(6);(b)(7)(C)					
Contracting Officer: (b)(6);(b)(7)(C) (202) 732- (b)(6);(b)(7)(C)					
Contract Specialist (b)(6);(b)(7)(C) (202) 732- (b)(6);(b)(7)(C)					
This modification to the FY 17 Task Order is to provide additional funding for detention services for ICE detainees at the Otero County Processing Center under the provisions of the Otero County, New Mexico Intergovernmental Service Agreement (IGSA) EROIGSA-14-0001. Continued ...					
Except as provided herein, all terms and conditions of the document referenced in Item 9 A or 10A, as heretofore changed, remains unchanged and in full force and effect.					
15A. NAME AND TITLE OF SIGNER (Type or print)		16A. NAME AND TITLE OF CONTRACTING OFFICER (Type or print)			
		(b)(6);(b)(7)(C)			
15B. CONTRACTOR/OFFEROR		15C. DATE SIGNED		ED	
(Signature of person authorized to sign)					
NSN 7540-01-152-8070 Previous edition unusable					
STANDARD FORM 30 (REV. 10-83) Prescribed by GSA FAR (48 CFR) 53.243					

CONTINUATION SHEET

REFERENCE NO. OF DOCUMENT BEING CONTINUED

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NAME OF OFFEROR OR CONTRACTOR

COUNTY OF OTERO

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>The purpose of this modification is to provide funding for transportation services in the total amount of \$(b)(4) 0 Please see Contract Line Item Numbers (CLINs) for details.</p> <p>As a result, the obligated amount of this Task Order has increased:</p> <p>(b)(4)</p> <p>From By: To:</p> <p>The funding provided in this modification is the amount presently available for payment and allotted to this task order. The service provider agrees to perform to the point that does not exceed the total amount currently allotted to the items currently funded under this task order. The service provider is not authorized to continue to work on those item(s) beyond that point. The Government will not be obligated to reimburse the service provider in excess of the amount allotted to those item(s) for performance beyond the funding allotted.</p> <p>*****</p> <p>Exempt Action: Y Sensitive Award: SPII</p> <p>FOB: Destination</p> <p>Period of Performance: 02/01/2017 to 01/31/2018</p> <p>Change Item 0006 to read as follows (amount shown is the total amount):</p> <p>0006 Medical, Dental, and Check Cashing Transportation (effective 3/1/2016) at a rate of (b)(4) er month.</p> <p>Funding provided has increased:</p> <p>From: (b)(4) By: \$ To: \$</p> <p>Accounting Info: (b)(7)(E) ---</p> <p>Funded: \$0.00</p> <p>Accounting Info: (b)(7)(E)</p> <p>Continued ...</p>				234,685.00

CONTINUATION SHEET

REFERENCE NO. OF DOCUMENT BEING CONTINUED

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NAME OF OFFEROR OR CONTRACTOR

COUNTY OF OTERO

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	000000 Funded: \$0.00 Accounting Info: (b)(7)(E) Funded: \$0.00 Accounting Info: (b)(7)(E) Funded: \$0.00 Accounting Info: (b)(7)(E) Funded: (b)(4) Change Item 0006A to read as follows (amount shown is the total amount): 0006A Stationary Guard Rate 53,892.08 (b)(4) r hour Funding has increased: From: (b)(4) By: \$ To: \$ Accounting Info: (b)(7)(E) Funded: \$0.00 Accounting Info: (b)(7)(E) Funded: (b)(4) Change Item 0006B to read as follows (amount shown is the total amount): 0006B (b)(4) e Stationary Guard Rate 26,325.74 (b)(4) per hour Funding has increased: From: (b)(4) By: \$ Continued ...				

CONTINUATION SHEET

REFERENCE NO. OF DOCUMENT BEING CONTINUED
EROIGSA-14-0001, /HSCEDM-17-F-IG138/P00010

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NAME OF OFFEROR OR CONTRACTOR
COUNTY OF OTERO

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>To: (b)(4)</p> <p>Accounting Info: (b)(7)(E)</p> <p>Funded: \$0.00 Accounting Info: (b)(7)(E)</p> <p>Funded (b)(4)</p> <p>***** All terms and conditions remain the same</p>				

AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT		1. CONTRACT ID CODE		PAGE OF PAGES	
				1 4	
2. AMENDMENT/MODIFICATION NO. P00011		3. EFFECTIVE DATE See Block 16C		4. REQUISITION/PURCHASE REQ. NO. 192118FEP00000070	
6. ISSUED BY ICE/DCR		7. ADMINISTERED BY (If other than Item 6) ICE/DCR		5. PROJECT NO. (If applicable)	
ICE/DETENTION COMPLIANCE REMOVALS IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 801 I STREET NW SUITE 930 WASHINGTON DC 20536		ICE/DETENTION COMPLIANCE REMOVALS IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 801 I STREET NW SUITE 930 WASHINGTON DC 20536			
8. NAME AND ADDRESS OF CONTRACTOR (No., street, county, State and ZIP Code) COUNTY OF OTERO 26 MCGREGOR RANGE RD CHAPARRAL NM 880817753		9A. AMENDMENT OF SOLICITATION NO. 9B. DATED (SEE ITEM 11) 10A. MODIFICATION OF CONTRACT/ORDER NO. EROIGSA-14-0001, HSCEDM-17-F-IG138 10B. DATED (SEE ITEM 13) 03/20/2017			
CODE 8290769130000		FACILITY CODE			

11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS

☐ The above numbered solicitation is amended as set forth in Item 14. The hour and date specified for receipt of Offers ☐ is extended. ☐ is not extended.
Offers must acknowledge receipt of this amendment prior to the hour and date specified in the solicitation or as amended, by one of the following methods: (a) By completing Items 8 and 15, and returning _____ copies of the amendment; (b) By acknowledging receipt of this amendment on each copy of the offer submitted; or (c) By separate letter or telegram which includes a reference to the solicitation and amendment numbers. FAILURE OF YOUR ACKNOWLEDGEMENT TO BE RECEIVED AT THE PLACE DESIGNATED FOR THE RECEIPT OF OFFERS PRIOR TO THE HOUR AND DATE SPECIFIED MAY RESULT IN REJECTION OF YOUR OFFER. If by virtue of this amendment you desire to change an offer already submitted, such change may be made by telegram or letter, provided each telegram or letter makes reference to the solicitation and this amendment, and is received prior to the opening hour and date specified.

12. ACCOUNTING AND APPROPRIATION DATA (If required)
See Schedule Net Increase: (b)(4)

13. THIS ITEM ONLY APPLIES TO MODIFICATION OF CONTRACTS/ORDERS. IT MODIFIES THE CONTRACT/ORDER NO. AS DESCRIBED IN ITEM 14.

CHECK ONE	A. THIS CHANGE ORDER IS ISSUED PURSUANT TO: (Specify authority) THE CHANGES SET FORTH IN ITEM 14 ARE MADE IN THE CONTRACT ORDER NO. IN ITEM 10A.
	B. THE ABOVE NUMBERED CONTRACT/ORDER IS MODIFIED TO REFLECT THE ADMINISTRATIVE CHANGES (such as changes in paying office, appropriation date, etc.) SET FORTH IN ITEM 14, PURSUANT TO THE AUTHORITY OF FAR 43.103(b).
	C. THIS SUPPLEMENTAL AGREEMENT IS ENTERED INTO PURSUANT TO AUTHORITY OF:
X	D. OTHER (Specify type of modification and authority) Unilateral Funding Modification

E. IMPORTANT: Contractor ☒ is not. ☐ is required to sign this document and return _____ copies to the issuing office.

14. DESCRIPTION OF AMENDMENT/MODIFICATION (Organized by UCF section headings, including solicitation/contract subject matter where feasible.)

DUNS Number: 829076913

Field Office Point of Contact: (b)(6);(b)(7)(C) 915-856-(b)(6);(b)(7)(C)
Alternate Field Office POC: (b)(6);(b)(7)(C) 915 856-(b)(6);(b)(7)(C)
Contracting Officer's Representative (COR) (b)(6);(b)(7)(C) (915) 834-(b)(6);(b)(7)(C)
Alternate COR: (b)(6);(b)(7)(C) (915) 834-(b)(6);(b)(7)(C)
Contracting Officer (b)(6);(b)(7)(C) (202) 732-(b)(6);(b)(7)(C)
Contract Specialist: (b)(6);(b)(7)(C) (202) 732-(b)(6);(b)(7)(C)

This modification to the FY 17 Task Order is to provide additional funding for detention services for ICE detainees at the Otero County Processing Center under the provisions of the Otero County, New Mexico Intergovernmental Service Agreement (IGSA) EROIGSA-14-0001. Continued ...

Except as provided herein, all terms and conditions of the document referenced in Item 9 A or 10A, as heretofore changed, remains unchanged and in full force and effect.

15A. NAME AND TITLE OF SIGNER (Type or print)		16A. NAME AND TITLE OF CONTRACTING OFFICER (Type or print) (b)(6);(b)(7)(C)	
15B. CONTRACTOR/OFFEROR (Signature of person authorized to sign)		15C. DATE SIGNED SIGNED	

NSN 7540-01-152-8070
Previous edition unusable

STANDARD FORM 30 (REV. 10-83)
Prescribed by GSA
FAR (48 CFR) 53.243

CONTINUATION SHEET

REFERENCE NO. OF DOCUMENT BEING CONTINUED

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NAME OF OFFEROR OR CONTRACTOR

COUNTY OF OTERO

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>The purpose of this modification is as follows:</p> <p>A. Add Ms. Stella Tellas as an Alternate Contracting Officer Representative (ACOR).</p> <p>B. Provide funding for Transportation and Related Transportation Services in the total amount of \$120,000.00 Please see Contract Line Item Numbers (CLINs) for details.</p> <p>The funding provided in this modification is the amount presently available for payment and allotted to this task order. The service provider agrees to perform to the point that does not exceed the total amount currently allotted to the items currently funded under this task order. The service provider is not authorized to continue to work on those item(s) beyond that point. The Government will not be obligated to reimburse the service provider in excess of the amount allotted to those item(s) for performance beyond the funding allotted.</p> <p>*****</p> <p>Exempt Action: Y Sensitive Award: SPII</p> <p>FOB: Destination</p> <p>Period of Performance: 03/01/2017 to 02/28/2018</p> <p>Change Item 0006 to read as follows (amount shown is the total amount):</p>				
0006	<p>Medical, Dental, and Check Cashing Transportation (effective 3/1/2016) at a rate of \$(b)(4) per month.</p> <p>Funding provided has increased: From (b)(4) By: To: </p> <p>Accounting Info: (b)(7)(E)</p> <p>Funded: \$0.00 Accounting Info: (b)(7)(E)</p> <p>Funded: \$0.00 Accounting Info: (b)(7)(E)</p> <p>Continued ...</p>				262,295.00

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NAME OF OFFEROR OR CONTRACTOR
COUNTY OF OTERO

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>(b)(7)(E)</p> <p>Funded: \$0.00</p> <p>Accounting Info:</p> <p>(b)(7)(E)</p> <p>Funded: \$0.00</p> <p>Accounting Info:</p> <p>(b)(7)(E)</p> <p>Funded: \$0.00</p> <p>Accounting Info:</p> <p>(b)(7)(E)</p> <p>Funded: (b)(4)</p> <p>Change Item 0006A to read as follows (amount shown is the total amount):</p> <p>0006A Stationary Guard Rate (b)(4) per hour</p> <p>Funding has increased: From (b)(4) By: To:</p> <p>Accounting Info: (b)(7)(E)</p> <p>Funded: \$0.00</p> <p>Accounting Info: (b)(7)(E)</p> <p>Funded: \$0.00</p> <p>Accounting Info: (b)(7)(E)</p> <p>Funded (b)(4)</p> <p>Change Item 0006B to read as follows (amount shown is the total amount):</p>				103,892.08
0006B	Overtime Stationary Guard Rate Continued ...				68,715.74

NAME OF OFFEROR OR CONTRACTOR
COUNTY OF OTERO

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>(b)(4) per hour</p> <p>Funding has increased: From (b)(4) By: To:</p> <p>Accounting Info: (b)(7)(E) -----</p> <p>Funded: \$0.00 Accounting Info: (b)(7)(E) -----</p> <p>Funded: \$0.00 Accounting Info: (b)(7)(E) -----</p> <p>Funded: (b)(4) ***** As a result, the obligated amount of this Task Order has increased: From (b)(4) By: To:</p> <p>All terms and conditions remain the same</p>				

CONTINUATION SHEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED EROIGSA-14-0001,/HSCEDM-17-F-IG138/P00012	PAGE OF 2 6
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NAME OF OFFEROR OR CONTRACTOR
COUNTY OF OTERO

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
0001a	<p>The purpose of this modification is as follows: A. Incorporate Contract Line Item (CLIN) 0007-Fiscal Year 2018 (FY 18) Portion for Request for Equitable Adjustment (REA) B. Incorporate CLIN 0008-Fiscal Year (FY 17) Prior Year Funding. C. Provide funding in the total amount of (b)(4), please see CLINs for details. D. Pay the Fiscal Year 2018 (FY 18) portion of a REA from the incorporation of Wage Determination associated in CLIN 0007 E. Pay the Fiscal Year 2017 (FY 17) portion of a REA using Prior Year Funding associated in CLIN 0008</p> <p>The funding provided in this modification is the amount presently available for payment and allotted to this task order. The service provider agrees to perform to the point that does not exceed the total amount currently allotted to the items currently funded under this task order. The service provider is not authorized to continue to work on those item(s) beyond that point. The Government will not be obligated to reimburse the service provider in excess of the amount allotted to those item(s) for performance beyond the funding allotted. ***** Exempt Action: Y Sensitive Award: SPII FOB: Destination Period of Performance: 03/01/2017 to 02/28/2018</p> <p>Change Item 0001a to read as follows (amount shown is the total amount):</p> <p>Detention Services Bed Day Rate of \$92.01 as of October 3, 2017 and stated on P00009 of contract EROIGSA-14-0001.</p> <p>The amount for this CLIN has increased From (b)(4) By: To:</p> <p>Requisition No: 192118FEP000000007, 192118FEP000000020, 192118FEP000000029, 192118FEP000000043.1, 192118FEP000000045</p> <p>Accounting Info: (b)(7)(E) Continued ...</p>				10,682,829.42

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EROIGSA-14-0001, /HSCEDM-17-F-IG138/P00012

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NAME OF OFFEROR OR CONTRACTOR
COUNTY OF OTERO

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>(b)(7)(E)</p> <p>Funded: \$0.00</p> <p>Accounting Info:</p> <p>(b)(7)(E)</p> <p>Funded: \$0.00</p> <p>Accounting Info:</p> <p>(b)(7)(E)</p> <p>Funded: \$0.00</p> <p>(b)(7)(E)</p> <p>Funded: \$0.00</p> <p>Accounting Info:</p> <p>(b)(7)(E)</p> <p>Funded: (b)(4)</p> <p>Change Item 0006 to read as follows (amount shown is the total amount):</p> <p>0006 Medical, Dental, and Check Cashing Transportation (effective 3/1/2016) at a rate of (b)(4) per month.</p> <p>Funding provided has increased: From (b)(4) By: To:</p> <p>Requisition No: 192117FEP00000329, 192117FEP00000531, 192117FEP00000595, 192117FEP00000647, 192118FEP00000043.1, 192118FEP00000058.1, 192118FEP00000070</p> <p>Accounting Info:</p> <p>(b)(7)(E)</p> <p>Funded: \$0.00</p> <p>Accounting Info:</p> <p>(b)(7)(E)</p> <p>Funded: \$0.00</p> <p>Continued ...</p>				276,100.00

NAME OF OFFEROR OR CONTRACTOR
COUNTY OF OTERO

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	Accounting Info: (b)(7)(E) <div style="background-color: black; height: 40px; width: 100%;"></div> Funded: \$0.00 Accounting Info: (b)(7)(E) <div style="background-color: black; height: 40px; width: 100%;"></div> Funded: \$0.00 Accounting Info: (b)(7)(E) <div style="background-color: black; height: 40px; width: 100%;"></div> Funded: \$0.00 Accounting Info: (b)(7)(E) <div style="background-color: black; height: 40px; width: 100%;"></div> Funded: \$0.00 Accounting Info: (b)(7)(E) <div style="background-color: black; height: 40px; width: 100%;"></div> Funded: \$0.00 Accounting Info: (b)(7)(E) <div style="background-color: black; height: 40px; width: 100%;"></div> Funded: \$0.00 Discount Terms: Net 30 Change Item 0006A to read as follows (amount shown is the total amount): 0006A (b)(4) Primary Guard Rate per hour Funding has increased: From (b)(4) By: To: Requisition No: 192117FEP000000595, 192118FEP00000043.1, 192118FEP00000058.1, 192118FEP00000070 Accounting Info: (b)(7)(E) <div style="background-color: black; height: 40px; width: 100%;"></div> Funded: \$0.00 Accounting Info: (b)(7)(E) <div style="background-color: black; height: 40px; width: 100%;"></div> Continued ...				105,892.08

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NAME OF OFFEROR OR CONTRACTOR
COUNTY OF OTERO

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>(b)(7)(E)</p> <p>Funded: \$0.00</p> <p>Accounting Info:</p> <p>(b)(7)(E)</p> <p>Funded: \$0.00</p> <p>Accounting Info:</p> <p>(b)(7)(E)</p> <p>Funded: (b)(4)</p> <p>Change Item 0006B to read as follows (amount shown is the total amount):</p> <p>0006B Overtime Stationary Guard Rate</p> <p>(b)(4) per hour</p> <p>Funding has increased:</p> <p>From: (b)(4)</p> <p>By:</p> <p>To:</p> <p>Requisition No: 192117FEP000000595, 192118FEP00000043.1, 192118FEP00000058.1, 192118FEP00000070</p> <p>Accounting Info:</p> <p>(b)(7)(E)</p> <p>Funded: \$0.00</p> <p>Accounting Info:</p> <p>(b)(7)(E)</p> <p>Funded: \$0.00</p> <p>Accounting Info:</p> <p>(b)(7)(E)</p> <p>Funded: \$0.00</p> <p>Accounting Info:</p> <p>(b)(7)(E)</p> <p>Funded: (b)(4)</p> <p>Add Item 0007 as follows:</p> <p>Continued ...</p>				70,910.74

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NAME OF OFFEROR OR CONTRACTOR
COUNTY OF OTERO

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
0007	<p>Fiscal Year 2018 (FY 18) Portion for Request for Equitable Adjustment</p> <p>Due to an increase n the Wage Determination 2015-5455 Revision No. 2, Dated 12/30/2016 with an effective date of 04/01/2017. Funds associated are from 10/01/2017 to 02/28/2018</p> <p>Product/Service Code: S206</p> <p>Product/Service Description: HOUSEKEEPING- GUARD</p> <p>Requisition No: 192118FEP00000043.1</p> <p>Accounting Info:</p> <p>(b)(7)(E)</p> <p>Funded: (b)(4)</p> <p>Discount Terms:</p> <p>Net 30</p> <p>Add Item 0008 as follows:</p>				76,858.85
0008	<p>Fiscal Year (FY 17) Prior Year Funding</p> <p>Due to a Request for Equitable Adjustment</p> <p>Due to an increase in the Wage Determination 2015-5455 Revision No. 2, Dated 12/30/2016 with an effective date of 04/01/2017.</p> <p>Requisition No: 192118FEP000000097</p> <p>Accounting Info:</p> <p>(b)(7)(E)</p> <p>Funded: (b)(4)</p> <p>*****</p> <p>As a result, the obligated amount of this Task Order has increased:</p> <p>From (b)(4)</p> <p>By:</p> <p>To: 121,555,511.25</p> <p>All terms and conditions remain the same.</p>				92,230.62

AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT		1. CONTRACT ID CODE		PAGE OF PAGES	
				1 3	
2. AMENDMENT/MODIFICATION NO. P00009		3. EFFECTIVE DATE See Block 16C		4. REQUISITION/PURCHASE REQ. NO. 192118FEP00000045	
6. ISSUED BY		CODE		5. PROJECT NO. (If applicable)	
ICE/DCR		ICE/DCR			
ICEDETENTION COMPLIANCE REMOVALS IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 801 I STREET NW SUITE (b)(6),(b)(7)(C) WASHINGTON DC 20536		ICEDETENTION COMPLIANCE REMOVALS IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 801 I STREET NW SUITE (b)(6),(b)(7)(C) WASHINGTON DC 20536			
8. NAME AND ADDRESS OF CONTRACTOR (No., street, county, State and ZIP Code)		(x)		9A. AMENDMENT OF SOLICITATION NO.	
COUNTY OF OTERO 26 MCGREGOR RANGE RD CHAPARRAL NM 880817753				9B. DATED (SEE ITEM 11)	
		x		10A. MODIFICATION OF CONTRACT/ORDER NO. EROIGSA-14-0001, HSCEDM-17-F-IG138	
				10B. DATED (SEE ITEM 13) 03/20/2017	
CODE 8290769130000		FACILITY CODE			

11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS

☐ The above numbered solicitation is amended as set forth in Item 14. The hour and date specified for receipt of Offers ☐ is extended. ☐ is not extended.
Offers must acknowledge receipt of this amendment prior to the hour and date specified in the solicitation or as amended, by one of the following methods: (a) By completing Items 8 and 15, and returning _____ copies of the amendment; (b) By acknowledging receipt of this amendment on each copy of the offer submitted; or (c) By separate letter or telegram which includes a reference to the solicitation and amendment numbers. FAILURE OF YOUR ACKNOWLEDGEMENT TO BE RECEIVED AT THE PLACE DESIGNATED FOR THE RECEIPT OF OFFERS PRIOR TO THE HOUR AND DATE SPECIFIED MAY RESULT IN REJECTION OF YOUR OFFER. If by virtue of this amendment you desire to change an offer already submitted, such change may be made by telegram or letter, provided each telegram or letter makes reference to the solicitation and this amendment, and is received prior to the opening hour and date specified. (b)(4)

12. ACCOUNTING AND APPROPRIATION DATA (If required) Net Increase:
See Schedule

13. THIS ITEM ONLY APPLIES TO MODIFICATION OF CONTRACTS/ORDERS. IT MODIFIES THE CONTRACT/ORDER NO. AS DESCRIBED IN ITEM 14.

CHECK ONE	A. THIS CHANGE ORDER IS ISSUED PURSUANT TO: (Specify authority) THE CHANGES SET FORTH IN ITEM 14 ARE MADE IN THE CONTRACT ORDER NO. IN ITEM 10A.
	B. THE ABOVE NUMBERED CONTRACT/ORDER IS MODIFIED TO REFLECT THE ADMINISTRATIVE CHANGES (such as changes in paying office, appropriation date, etc.) SET FORTH IN ITEM 14, PURSUANT TO THE AUTHORITY OF FAR 43.103(b).
	C. THIS SUPPLEMENTAL AGREEMENT IS ENTERED INTO PURSUANT TO AUTHORITY OF:
X	D. OTHER (Specify type of modification and authority) Unilateral Funding Modification

E. IMPORTANT: Contractor ☒ is not. ☐ is required to sign this document and return _____ copies to the issuing office.

14. DESCRIPTION OF AMENDMENT/MODIFICATION (Organized by UCF section headings, including solicitation/contract subject matter where feasible.)

DUNS Number: 829076913
Field Office Point of Contact (b)(6),(b)(7)(C) 915-856-(b)(6),(b)(7)(C)
Alternate Field Office POC (b)(6),(b)(7)(C) 915-856-(b)(6),(b)(7)(C)
Contracting Officer's Representative (COR): (b)(6),(b)(7)(C) 15) 834-(b)(6),(b)(7)(C)
Alternate COR: (b)(6),(b)(7)(C) 915) 834-(b)(6),(b)(7)(C)
Contracting Officer: (b)(6),(b)(7)(C) (202) 732-(b)(6),(b)(7)(C)
Contract Specialist: (b)(6),(b)(7)(C) (202) 732-(b)(6),(b)(7)(C)

This modification to the FY 17 Task Order is to provide additional funding for detention services for ICE detainees at the Otero County Processing Center under the provisions of the Otero County, New Mexico Intergovernmental Service Agreement (IGSA) EROIGSA-14-0001. Continued ...

Except as provided herein, all terms and conditions of the document referenced in Item 9 A or 10A, as heretofore changed, remains unchanged and in full force and effect.

15A. NAME AND TITLE OF SIGNER (Type or print)		16A. NAME AND TITLE OF CONTRACTING OFFICER (Type or print)	
		(b)(6),(b)(7)(C)	
15B. CONTRACTOR/OFFEROR		15C. DATE SIGNED	
(Signature of person authorized to sign)			

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NAME OF OFFEROR OR CONTRACTOR
COUNTY OF OTERO

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>The purpose of this modification is as follows:</p> <p>A. Provide funding in the amount of (b)(4) for Detention Services (CLIN 0001a).</p> <p>B. As a result, the obligated amount of this Task Order has increased:</p> <p>From (b)(4)</p> <p>By:</p> <p>To:</p> <p>The funding provided in this modification is the amount presently available for payment and allotted to this task order. The service provider agrees to perform to the point that does not exceed the total amount currently allotted to the items currently funded under this task order. The service provider is not authorized to continue to work on those item(s) beyond that point. The Government will not be obligated to reimburse the service provider in excess of the amount allotted to those item(s) for performance beyond the funding allotted.</p> <p>*****</p> <p>Exempt Action: Y Sensitive Award: SPII</p> <p>FOB: Destination</p> <p>Period of Performance: 02/01/2017 to 01/31/2018</p> <p>Change Item 0001a to read as follows (amount shown is the total amount):</p> <p>0001a Detention Service (b)(4) 8,882,829.42</p> <p>Bed Day Rate of (b)(4) of October 3, 2017 and stated on P00009 of contract EROIGSA-14-0001.</p> <p>The amount for this CLIN has increased</p> <p>From (b)(4)</p> <p>By:</p> <p>To:</p> <p>The quantity for this CLIN has increased:</p> <p>From (b)(4)</p> <p>By:</p> <p>To:</p> <p>Accounting Info:</p> <p>(b)(7)(E)</p> <p>Continued ...</p>				

CONTINUATION SHEET

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NAME OF OFFEROR OR CONTRACTOR
COUNTY OF OTERO

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>Funded: \$0.00</p> <p>Accounting Info:</p> <p>(b)(7)(E)</p> <p>Funded: \$0.00</p> <p>Accounting Info:</p> <p>(b)(7)(E)</p> <p>Funded: \$0.00</p> <p>Accounting Info:</p> <p>(b)(7)(E)</p> <p>Funded: (b)(4)</p> <p>*****</p> <p>All terms and conditions remain the same</p>				

AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT		1. CONTRACT ID CODE	PAGE OF PAGES 1 7
2. AMENDMENT/MODIFICATION NO. P00003	3. EFFECTIVE DATE See Block 16C	4. REQUISITION/PURCHASE REQ. NO. 192117FEP00000647	5. PROJECT NO. (If applicable)
6. ISSUED BY ICE/DCR	CODE ICE/DCR	7. ADMINISTERED BY (If other than Item 6)	CODE ICE/DCR
ICE/DETENTION COMPLIANCE REMOVALS IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 801 I STREET NW SUITE (b)(6), WASHINGTON DC 20536 (b)(7)(C)		ICE/DETENTION COMPLIANCE REMOVALS IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 801 I STREET NW SUITE (b)(6), WASHINGTON DC 20536 (b)(7)(C)	
8. NAME AND ADDRESS OF CONTRACTOR (No., street, county, State and ZIP Code) COUNTY OF OTERO 26 MCGREGOR RANGE RD CHAPARRAL NM 880817753		(x) 9A. AMENDMENT OF SOLICITATION NO.	
		9B. DATED (SEE ITEM 11)	
		x 10A. MODIFICATION OF CONTRACT/ORDER NO. EROIGSA-14-0001, HSCEDM-17-F-IG138	
		10B. DATED (SEE ITEM 13) 03/20/2017	
CODE 8290769130000	FACILITY CODE		

11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS

☐ The above numbered solicitation is amended as set forth in Item 14. The hour and date specified for receipt of Offers ☐ is extended. ☐ is not extended.
Offers must acknowledge receipt of this amendment prior to the hour and date specified in the solicitation or as amended, by one of the following methods: (a) By completing Items 8 and 15, and returning _____ copies of the amendment; (b) By acknowledging receipt of this amendment on each copy of the offer submitted; or (c) By separate letter or telegram which includes a reference to the solicitation and amendment numbers. FAILURE OF YOUR ACKNOWLEDGEMENT TO BE RECEIVED AT THE PLACE DESIGNATED FOR THE RECEIPT OF OFFERS PRIOR TO THE HOUR AND DATE SPECIFIED MAY RESULT IN REJECTION OF YOUR OFFER. If by virtue of this amendment you desire to change an offer already submitted, such change may be made by telegram or letter, provided each telegram or letter makes reference to the solicitation and this amendment, and is received prior to the opening hour and date specified. (b)(4)

12. ACCOUNTING AND APPROPRIATION DATA (If required)
See Schedule Net Increase: (b)(4)

13. THIS ITEM ONLY APPLIES TO MODIFICATION OF CONTRACTS/ORDERS. IT MODIFIES THE CONTRACT/ORDER NO. AS DESCRIBED IN ITEM 14.

CHECK ONE	A. THIS CHANGE ORDER IS ISSUED PURSUANT TO: (Specify authority) THE CHANGES SET FORTH IN ITEM 14 ARE MADE IN THE CONTRACT ORDER NO. IN ITEM 10A.
X	B. THE ABOVE NUMBERED CONTRACT/ORDER IS MODIFIED TO REFLECT THE ADMINISTRATIVE CHANGES (such as changes in paying office, appropriation date, etc.) SET FORTH IN ITEM 14, PURSUANT TO THE AUTHORITY OF FAR 43.103(b).
	C. THIS SUPPLEMENTAL AGREEMENT IS ENTERED INTO PURSUANT TO AUTHORITY OF:
	D. OTHER (Specify type of modification and authority)

E. IMPORTANT: Contractor ☒ is not. ☐ is required to sign this document and return _____ copies to the issuing office.

14. DESCRIPTION OF AMENDMENT/MODIFICATION (Organized by UCF section headings, including solicitation/contract subject matter where feasible.)

DUNS Number: 829076913
Field Office Point of Contact: (b)(6), (b)(7)(C) 915-856- (b)(6), (b)(7)(C)
Alternate Field Office POC: (b)(6), (b)(7)(C), 915 856- (b)(6)
Contracting Officer's Representative (COR): (b)(6), (b)(7)(C) (915) 834-4 (b)(6), (b)(7)(C)
Alternate COR: (b)(6), (b)(7)(C) (915) 834-4 (b)(6)
Contracting Officer: (b)(6), (b)(7)(C) (202) 732- (b)(6), (b)(7)(C)

The purpose of this modification to the FY 17 Task Order is to provide additional funding for detention services for ICE detainees at the Otero County Processing Center under the provisions of the Otero County, New Mexico Intergovernmental Service Agreement (IGSA) EROIGSA-14-0001. Funding in the amount of (b)(4) is provided.
Continued ...

Except as provided herein, all terms and conditions of the document referenced in Item 9 A or 10A, as heretofore changed, remains unchanged and in full force and effect.

15A. NAME AND TITLE OF SIGNER (Type or print)	16A. NAME AND TITLE OF CONTRACTING OFFICER (Type or print) (b)(6), (b)(7)(C)
15B. CONTRACTOR/OFFEROR (Signature of person authorized to sign)	15C. DATE SIGNED 16C. DATE SIGNED 08/09/2017

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NAME OF OFFEROR OR CONTRACTOR

COUNTY OF OTERO

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>The obligated amount of this Task Order has increased: From (b)(4) By: To:</p> <p>The funding provided in this modification is the amount presently available for payment and allotted to this task order. The service provider agrees to perform to the point that does not exceed the total amount currently allotted to the items currently funded under this task order. The service provider is not authorized to continue to work on those item(s) beyond that point. The Government will not be obligated to reimburse the service provider in excess of the amount allotted to those item(s) for performance beyond the funding allotted.</p> <p>***** Exempt Action: Y Sensitive Award: SPII Delivery: 30 Days After Award Discount Terms: Net 30 Delivery Location Code: ICE/ERO ICE ENFORCEMENT REMOVAL IMMIGRATION AND CUSTOMS ENFORCEMENT 801 I STREET NW SUITE 900 WASHINGTON DC 20536</p> <p>FOB: Destination Period of Performance: 02/01/2017 to 01/31/2018</p> <p>Change Item 0001 to read as follows (amount shown is the total amount):</p> <p>0001 DETAINEE HOUSING Bed day rate: (b)(4) Day (1-850 and 1000+ detainees)</p> <p>Beds Funded has increased: From (b)(4) By: To:</p> <p>Funding for this CLIN has increased: From (b)(4) By: To:</p> <p>Continued ...</p>				1,024,983.96

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NAME OF OFFEROR OR CONTRACTOR

COUNTY OF OTERO

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	Accounting Info: (b)(7)(E) Funded: \$0.00 Accounting Info: (b)(7)(E) Funded: \$0.00 Accounting Info: (b)(7)(E) Funded: \$ (b)(4) Change Item 0006 to read as follows (amount shown is the total amount): 0006 Medical, Dental, and Check Cashing Transportation (effective 3/1/2016) at a rate of (b)(4) per month. Funding provided has increased: From (b)(4) By: \$ To: \$ Accounting Info: (b)(7)(E) Funded: \$0.00 Accounting Info: (b)(7)(E) Funded: \$0.00 Accounting Info: (b)(7)(E) Funded: \$0.00 Accounting Info: (b)(7)(E) Funded: (b)(4) ***** Continued ...				27,610.00

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NAME OF OFFEROR OR CONTRACTOR

COUNTY OF OTERO

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>Invoicing Instructions: Service Providers/Contractors shall use these procedures when submitting an invoice. 1. Invoice Submission: Invoices shall be submitted in a .pdf format on a monthly basis via email to: Invoice.Consolidation@ice.dhs.gov Each email shall contain only one (1) invoice and the subject line of the email will annotate the invoice number. The emailed invoice shall include the 'bill to' address shown below:</p> <p>DHS, ICE Financial Operations - Burlington P.O. Box 1620 ATTN: ICE-ERO-FOD-FEP Williston, VT 05495-1620</p> <p>Note: the Service Provider's or Contractor's Dunn and Bradstreet (D&B) DUNS Number must be registered in the System for Award Management (SAM) at https://www.sam.gov prior to award and shall be notated on every invoice submitted to ensure prompt payment provisions are met. The ICE program office identified in the task order/contract shall also be notated on every invoice.</p> <p>2. Content of Invoices: Each invoice submission shall contain the following information: (i) Name and address of the Service Provider/Contractor. Note: the name, address and DUNS number on the invoice MUST match the information in both the Contract/Agreement and the information in the SAM. If payment is remitted to another entity, the name, address and DUNS information of that entity must also be provided which will require Government verification before payment can be processed; (ii) Dunn and Bradstreet (D&B) DUNS Number; (iii) Invoice date and invoice number; (iv) Agreement/Contract number, contract line item number and, if applicable, the order number; (v) Description, quantity, unit of measure, unit price, extended price and period of performance of the items or services delivered; (vi) Shipping number and date of shipment, including the bill of lading number and weight of shipment if shipped on Government bill of lading; Continued ...</p>				

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NAME OF OFFEROR OR CONTRACTOR

COUNTY OF OTERO

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>(vii) Terms of any discount for prompt payment offered;</p> <p>(viii) Remit to Address;</p> <p>(ix) Name, title, and phone number of person to notify in event of defective invoice; and</p> <p>3. Invoice Supporting Documentation. In order to ensure payment, the vendor must also submit supporting documentation to the Contracting Officer's Representative (COR) identified in the contract as described below. Supporting documentation shall be submitted to the COR or contract Point of Contact (POC) identified in the contract or task order with all invoices, as appropriate. See paragraph 4 for details regarding the safeguarding of information. Invoices without documentation to support invoiced items, containing charges for items outside the scope of the contract, or not based on the most recent contract base or modification rates will be considered improper and returned for resubmission. Supporting documentation requirements include:</p> <p>(i) Firm Fixed Price Items (items not subject to any adjustment on the basis of the contractor's cost experience, such as pre-established monthly guaranteed minimums for detention or transportation): do not require detailed supporting documentation unless specifically requested by the Government.</p> <p>(ii) Fixed Unit Price Items (items for allowable incurred costs, such as detention and/or transportation services with no defined minimum quantities, stationary guard or escort services, transportation mileage or other Minor Charges such as sack lunches and detainee wages): shall be fully supported with documentation substantiating the costs and/or reflecting the established price in the contract and submitted in .pdf format.</p> <p>(iii) Detention Services:</p> <p>(1) Bed day rate;</p> <p>(2) Resident's/detainee's check-in and check-out dates;</p> <p>(3) Number of bed days multiplied by the bed day rate;</p> <p>(4) Name of each detainee;</p> <p>(5) Resident's/detainee's identification information</p> <p>(iv) Transportation Services:</p> <p>Continued ...</p>				

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NAME OF OFFEROR OR CONTRACTOR

COUNTY OF OTERO

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>(1) The mileage rate being applied for that invoice.</p> <p>(2) Monthly billing reports listing transportation services provided; number of miles; transportation routes provided; locations serviced and/or names/numbers of detainees transported; an itemized listing of all other charges; and, for reimbursable expenses (e.g. travel expenses, special meals, etc.) copies of all receipts.</p> <p>(v) Stationary Guard Services:</p> <p>(1) The itemized monthly invoice shall state the number of hours being billed, the duration of the billing (times and dates) and the name of the resident(s)/detainee(s) that was/were guarded.</p> <p>(vi) Other Direct Charges:</p> <p>The invoice shall include appropriate supporting documentation for any direct charge billed for reimbursement.</p> <p>4. Safeguarding Information: As a contractor or vendor conducting business with Immigration and Customs Enforcement (ICE), you are required to comply with DHS Policy regarding the safeguarding of Sensitive Personally Identifiable Information (PII). Sensitive PII is information that identifies an individual, including an alien, and could result in harm, embarrassment, inconvenience or unfairness. Examples of Sensitive PII include information such as: Social Security Numbers, Alien Registration Numbers (A-Numbers), or combinations of information such as the individual's name or other unique identifier and full date of birth, citizenship, or immigration status.</p> <p>As part of your obligation to safeguard information, the follow precautions are required:</p> <p>(i) Email supporting documents containing Sensitive PII in an encrypted attachment with password sent separately.</p> <p>(ii) Never leave paper documents containing Sensitive PII unattended and unsecure. When not in use, these documents will be locked in drawers, cabinets, desks, etc. so the information is not accessible to those without a need to know.</p> <p>(iii) Use shredders when discarding paper documents containing Sensitive PII.</p> <p>(iv) Refer to the DHS Handbook for Safeguarding Sensitive Personally Identifiable Information (March 2012) found at</p> <p>Continued ...</p>				

NAME OF OFFEROR OR CONTRACTOR
COUNTY OF OTERO

ITEM NO. (A)	SUPPLIES/SERVICES	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
(b)(7)(E)	<div></div> <p>f for more information on and/or examples of Sensitive PII.</p> <p>5. If you have questions regarding payment, please contact ICE Financial Operations at 1-877-491-6521 or by e-mail at OCFO.CustomerService@ice.dhs.gov</p>				

AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT		1. CONTRACT ID CODE		PAGE OF PAGES	
2. AMENDMENT/MODIFICATION NO.		3. EFFECTIVE DATE		4. REQUISITION/PURCHASE REQ. NO.	
P00004		See Block 16C		192117FEP00000694	
6. ISSUED BY		CODE		5. PROJECT NO. (If applicable)	
ICE/DETENTION COMPLIANCE REMOVALS IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 801 I STREET NW SUITE 930 WASHINGTON DC 20536		ICE/DCR			
		7. ADMINISTERED BY (If other than Item 6)		CODE	
		ICE/DETENTION COMPLIANCE REMOVALS IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 801 I STREET NW SUITE 930 WASHINGTON DC 20536		ICE/DCR	
8. NAME AND ADDRESS OF CONTRACTOR (No., street, county, State and ZIP Code)			9A. AMENDMENT OF SOLICITATION NO.		
COUNTY OF OTERO 26 MCGREGOR RANGE RD CHAPARRAL NM 880817753			(x)		
			9B. DATED (SEE ITEM 11)		
			x		
			10A. MODIFICATION OF CONTRACT/ORDER NO.		
			EROIGSA-14-0001, HSCEDM-17-F-IG138		
			10B. DATED (SEE ITEM 13)		
CODE 8290769130000			FACILITY CODE		
			03/20/2017		
11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS					
<input type="checkbox"/> The above numbered solicitation is amended as set forth in Item 14. The hour and date specified for receipt of Offers <input type="checkbox"/> is extended, <input type="checkbox"/> is not extended. Offers must acknowledge receipt of this amendment prior to the hour and date specified in the solicitation or as amended, by one of the following methods: (a) By completing Items 8 and 15, and returning _____ copies of the amendment; (b) By acknowledging receipt of this amendment on each copy of the offer submitted; or (c) By separate letter or telegram which includes a reference to the solicitation and amendment numbers. FAILURE OF YOUR ACKNOWLEDGEMENT TO BE RECEIVED AT THE PLACE DESIGNATED FOR THE RECEIPT OF OFFERS PRIOR TO THE HOUR AND DATE SPECIFIED MAY RESULT IN REJECTION OF YOUR OFFER. If by virtue of this amendment you desire to change an offer already submitted, such change may be made by telegram or letter, provided each telegram or letter makes reference to the solicitation and this amendment, and is received prior to the opening hour and date specified.					
12. ACCOUNTING AND APPROPRIATION DATA (If required)			Net Increase:		
See Schedule			(b)(4)		
13. THIS ITEM ONLY APPLIES TO MODIFICATION OF CONTRACTS/ORDERS. IT MODIFIES THE CONTRACT/ORDER NO. AS DESCRIBED IN ITEM 14.					
CHECK ONE					
A. THIS CHANGE ORDER IS ISSUED PURSUANT TO: (Specify authority) THE CHANGES SET FORTH IN ITEM 14 ARE MADE IN THE CONTRACT ORDER NO. IN ITEM 10A.					
B. THE ABOVE NUMBERED CONTRACT/ORDER IS MODIFIED TO REFLECT THE ADMINISTRATIVE CHANGES (such as changes in paying office, appropriation date, etc.) SET FORTH IN ITEM 14, PURSUANT TO THE AUTHORITY OF FAR 43.103(b).					
C. THIS SUPPLEMENTAL AGREEMENT IS ENTERED INTO PURSUANT TO AUTHORITY OF:					
D. OTHER (Specify type of modification and authority)					
X Unilateral Funding Modification					
E. IMPORTANT: Contractor <input checked="" type="checkbox"/> is not, <input type="checkbox"/> is required to sign this document and return _____ copies to the issuing office.					
14. DESCRIPTION OF AMENDMENT/MODIFICATION (Organized by UCF section headings, including solicitation/contract subject matter where feasible.)					
DUNS Number: 829076913					
Field Office Point of Contact: (b)(6),(b)(7)(C) 915-85 (b)(6),(b)(7)(C)					
Alternate Field Office POC: (b)(6),(b)(7)(C) 915 856 (b)(6),(b)(7)(C)					
Contracting Officer's Representative (COR): (b)(6),(b)(7)(C) (915) 834 (b)(6),(b)(7)(C)					
Alternate COR: (b)(6),(b)(7)(C) (915) 834 (b)(6),(b)(7)(C)					
Contracting Officer: (b)(6),(b)(7)(C) (202) 732 (b)(6),(b)(7)(C)					
<p>The purpose of this modification to the FY 17 Task Order is to provide additional funding for detention services for ICE detainees at the Otero County Processing Center under the provisions of the Otero County, New Mexico Intergovernmental Service Agreement (IGSA) EROIGSA-14-0001. Funding in the amount of (b)(4) is provided.</p> <p>Continued ...</p>					
Except as provided herein, all terms and conditions of the document referenced in Item 9 A or 10A, as heretofore changed, remains unchanged and in full force and effect.					
15A. NAME AND TITLE OF SIGNER (Type or print)			16A. NAME AND TITLE OF CONTRACTING OFFICER (Type or print)		
			(b)(6),(b)(7)(C)		
15B. CONTRACTOR/OFFEROR		15C. DATE		16C. DATE SIGNED	
(Signature of person authorized to sign)				9/1/2017	
NSN 7540-01-152-8070 Previous edition unusable		FORM 30 (REV. 10-83) Prescribed by GSA FAR (48 CFR) 53.243			

CONTINUATION SHEET

REFERENCE NO. OF DOCUMENT BEING CONTINUED
EROIGSA-14-0001, /HSCEDM-17-F-IG138/P00004PAGE OF
2 6NAME OF OFFEROR OR CONTRACTOR
COUNTY OF OTERO

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>The obligated amount of this Task Order has increased: From: (b)(4) By: \$ To: \$</p> <p>The funding provided in this modification is the amount presently available for payment and allotted to this task order. The service provider agrees to perform to the point that does not exceed the total amount currently allotted to the items currently funded under this task order. The service provider is not authorized to continue to work on those item(s) beyond that point. The Government will not be obligated to reimburse the service provider in excess of the amount allotted to those item(s) for performance beyond the funding allotted.</p> <p>***** Exempt Action: Y Sensitive Award: SPII Delivery: 30 Days After Award Discount Terms: Net 30 Delivery Location Code: ICE/ERO ICE ENFORCEMENT REMOVAL IMMIGRATION AND CUSTOMS ENFORCEMENT 801 I STREET NW SUITE 900 WASHINGTON DC 20536</p> <p>FOB: Destination Period of Performance: 02/01/2017 to 01/31/2018</p> <p>Change Item 0001 to read as follows (amount shown is the total amount):</p> <p>0001 DETAINEE HOUSING Bed day rate: (b)(4) (1-850 and 1000+ detainees)</p> <p>Beds Funded has increased: From (b)(4) By: To:</p> <p>Funding for this CFM has increased: From (b)(4) By: To:</p> <p>Continued ...</p>				1,266,905.64

CONTINUATION SHEET

REFERENCE NO OF DOCUMENT BEING CONTINUED

EROIGSA-14-0001, /HSCEDM-17-F-IG138/P00004

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NAME OF OFFEROR OR CONTRACTOR

COUNTY OF OTERO

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>Accounting Info: (b)(7)(E)</p> <p>Funded: \$0.00</p> <p>Accounting Info: (b)(7)(E)</p> <p>Funded: \$0.00</p> <p>Accounting Info: (b)(7)(E)</p> <p>Funded: \$0.00</p> <p>Accounting Info: (b)(7)(E)</p> <p>Funded: (b)(7)(E)</p> <p>*****</p> <p>Invoicing Instructions: Service Providers/Contractors shall use these procedures when submitting an invoice. 1. Invoice Submission: Invoices shall be submitted in a .pdf format on a monthly basis via email to: Invoice.Consolidation@ice.dhs.gov Each email shall contain only one (1) invoice and the subject line of the email will annotate the invoice number. The emailed invoice shall include the 'bill to' address shown below:</p> <p>DHS, ICE Financial Operations - Burlington P.O. Box 1620 ATTN: ICE-ERO-FOD-FEP Williston, VT 05495-1620</p> <p>Note: the Service Provider's or Contractor's Dunn and Bradstreet (D&B) DUNS Number must be registered in the System for Award Management (SAM) at https://www.sam.gov prior to award and shall be notated on every invoice submitted to ensure prompt payment provisions are met. The ICE program office identified in the task order/contract shall also be notated on every invoice. Continued ...</p>				

CONTINUATION SHEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED EROIGSA-14-0001, /HSCEDM-17-F-IG138/P00004	PAGE	OF
		4	6

NAME OF OFFEROR OR CONTRACTOR
COUNTY OF OTERO

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>2. Content of Invoices: Each invoice submission shall contain the following information:</p> <p>(i) Name and address of the Service Provider/Contractor. Note: the name, address and DUNS number on the invoice MUST match the information in both the Contract/Agreement and the information in the SAM. If payment is remitted to another entity, the name, address and DUNS information of that entity must also be provided which will require Government verification before payment can be processed;</p> <p>(ii) Dunn and Bradstreet (D&B) DUNS Number;</p> <p>(iii) Invoice date and invoice number;</p> <p>(iv) Agreement/Contract number, contract line item number and, if applicable, the order number;</p> <p>(v) Description, quantity, unit of measure, unit price, extended price and period of performance of the items or services delivered;</p> <p>(vi) Shipping number and date of shipment, including the bill of lading number and weight of shipment if shipped on Government bill of lading;</p> <p>(vii) Terms of any discount for prompt payment offered;</p> <p>(viii) Remit to Address;</p> <p>(ix) Name, title, and phone number of person to notify in event of defective invoice; and</p> <p>3. Invoice Supporting Documentation. In order to ensure payment, the vendor must also submit supporting documentation to the Contracting Officer's Representative (COR) identified in the contract as described below. Supporting documentation shall be submitted to the COR or contract Point of Contact (POC) identified in the contract or task order with all invoices, as appropriate. See paragraph 4 for details regarding the safeguarding of information. Invoices without documentation to support invoiced items, containing charges for items outside the scope of the contract, or not based on the most recent contract base or modification rates will be considered improper and returned for resubmission. Supporting documentation requirements include:</p> <p>(i) Firm Fixed Price Items (items not subject to any adjustment on the basis of the contractor's cost experience, such as pre-established monthly guaranteed minimums for detention or transportation): do not require detailed</p> <p>Continued ...</p>				

CONTINUATION SHEET

REFERENCE NO. OF DOCUMENT BEING CONTINUED
EROIGSA-14-0001, /HSCEDM-17-F-IG138/P00004

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NAME OF OFFEROR OR CONTRACTOR
COUNTY OF OTERO

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>supporting documentation unless specifically requested by the Government.</p> <p>(ii) Fixed Unit Price Items (items for allowable incurred costs, such as detention and/or transportation services with no defined minimum quantities, stationary guard or escort services, transportation mileage or other Minor Charges such as sack lunches and detainee wages): shall be fully supported with documentation substantiating the costs and/or reflecting the established price in the contract and submitted in .pdf format.</p> <p>(iii) Detention Services:</p> <p>(1) Bed day rate;</p> <p>(2) Resident's/detainee's check-in and check-out dates;</p> <p>(3) Number of bed days multiplied by the bed day rate;</p> <p>(4) Name of each detainee;</p> <p>(5) Resident's/detainee's identification information</p> <p>(iv) Transportation Services:</p> <p>(1) The mileage rate being applied for that invoice.</p> <p>(2) Monthly billing reports listing transportation services provided; number of miles; transportation routes provided; locations serviced and/or names/numbers of detainees transported; an itemized listing of all other charges; and, for reimbursable expenses (e.g. travel expenses, special meals, etc.) copies of all receipts.</p> <p>(v) Stationary Guard Services:</p> <p>(1) The itemized monthly invoice shall state the number of hours being billed, the duration of the billing (times and dates) and the name of the resident(s)/detainee(s) that was/were guarded.</p> <p>(vi) Other Direct Charges:</p> <p>The invoice shall include appropriate supporting documentation for any direct charge billed for reimbursement.</p> <p>4. Safeguarding Information: As a contractor or vendor conducting business with Immigration and Customs Enforcement (ICE), you are required to comply with DHS Policy regarding the safeguarding of Sensitive Personally Identifiable Information (PII). Sensitive PII is information that identifies an individual, including an alien, and could result in harm, embarrassment,</p> <p>Continued ...</p>				

CONTINUATION SHEET

REFERENCE NO. OF DOCUMENT BEING CONTINUED

EROIGSA-14-0001, /HSCEDM-17-F-IG138/P00004

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OF

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NAME OF OFFEROR OR CONTRACTOR

COUNTY OF OTERO

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>inconvenience or unfairness. Examples of Sensitive PII include information such as: Social Security Numbers, Alien Registration Numbers (A-Numbers), or combinations of information such as the individual's name or other unique identifier and full date of birth, citizenship, or immigration status.</p> <p>As part of your obligation to safeguard information, the follow precautions are required:</p> <p>(i) Email supporting documents containing Sensitive PII in an encrypted attachment with password sent separately.</p> <p>(ii) Never leave paper documents containing Sensitive PII unattended and unsecure. When not in use, these documents will be locked in drawers, cabinets, desks, etc. so the information is not accessible to those without a need to know.</p> <p>(iii) Use shredders when discarding paper documents containing Sensitive PII.</p> <p>(iv) Refer to the DHS Handbook for Safeguarding Sensitive Personally Identifiable Information (March 2012) found at</p> <p>(b)(7)(E)</p> <p>f for more information on and/or examples of Sensitive PII.</p> <p>5. If you have questions regarding payment, please contact ICE Financial Operations at 1-877-491-6521 or by e-mail at OCFO.CustomerService@ice.dhs.gov</p>				

AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT		1. CONTRACT ID CODE		PAGE OF PAGES	
				1 7	
2. AMENDMENT/MODIFICATION NO.		3. EFFECTIVE DATE		4. REQUISITION/PURCHASE REQ. NO.	
P00001		See Block 16C		192117FEP00000531	
6. ISSUED BY		CODE		7. ADMINISTERED BY (If other than Item 6)	
		ICE/DCR		CODE ICE/DCR	
ICEDETENTION COMPLIANCE REMOVALS IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 801 I STREET NW SUITE (b)(6);(b)(7)(C) WASHINGTON DC 20536			ICEDETENTION COMPLIANCE REMOVALS IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 801 I STREET NW SUITE (b)(6);(b)(7)(C) WASHINGTON DC 20536		
8. NAME AND ADDRESS OF CONTRACTOR (No., street, county, State and ZIP Code)			9A. AMENDMENT OF SOLICITATION NO.		
COUNTY OF OTERO 26 MCGREGOR RANGE RD CHAPARRAL NM 880817753			(x)		
			9B. DATED (SEE ITEM 11)		
			10A. MODIFICATION OF CONTRACT/ORDER NO.		
			EROIGSA-14-0001, HSCEDM-17-F-IG138		
			10B. DATED (SEE ITEM 13)		
			03/20/2017		
CODE 8290769130000		FACILITY CODE			
11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS					
<input type="checkbox"/> The above numbered solicitation is amended as set forth in Item 14. The hour and date specified for receipt of Offers <input type="checkbox"/> is extended. <input type="checkbox"/> is not extended. Offers must acknowledge receipt of this amendment prior to the hour and date specified in the solicitation or as amended, by one of the following methods: (a) By completing Items 8 and 15, and returning _____ copies of the amendment; (b) By acknowledging receipt of this amendment on each copy of the offer submitted, or (c) By separate letter or telegram which includes a reference to the solicitation and amendment numbers. FAILURE OF YOUR ACKNOWLEDGEMENT TO BE RECEIVED AT THE PLACE DESIGNATED FOR THE RECEIPT OF OFFERS PRIOR TO THE HOUR AND DATE SPECIFIED MAY RESULT IN REJECTION OF YOUR OFFER. If by virtue of this amendment you desire to change an offer already submitted, such change may be made by telegram or letter, provided each telegram or letter makes reference to the solicitation and this amendment, and is received prior to the opening hour and date specified.					
12. ACCOUNTING AND APPROPRIATION DATA (If required)			Net Increase:		
See Schedule			(b)(4)		
13. THIS ITEM ONLY APPLIES TO MODIFICATION OF CONTRACTS/ORDERS. IT MODIFIES THE CONTRACT/ORDER NO. AS DESCRIBED IN ITEM 14.					
CHECK ONE					
A. THIS CHANGE ORDER IS ISSUED PURSUANT TO. (Specify authority) THE CHANGES SET FORTH IN ITEM 14 ARE MADE IN THE CONTRACT ORDER NO. IN ITEM 10A.					
B. THE ABOVE NUMBERED CONTRACT/ORDER IS MODIFIED TO REFLECT THE ADMINISTRATIVE CHANGES (such as changes in paying office, appropriation date, etc.) SET FORTH IN ITEM 14, PURSUANT TO THE AUTHORITY OF FAR 43.103(b).					
C. THIS SUPPLEMENTAL AGREEMENT IS ENTERED INTO PURSUANT TO AUTHORITY OF					
D. OTHER (Specify type of modification and authority)					
X Unilateral Funding Modification					
E. IMPORTANT: Contractor <input checked="" type="checkbox"/> is not. <input type="checkbox"/> is required to sign this document and return _____ copies to the issuing office.					
14. DESCRIPTION OF AMENDMENT/MODIFICATION (Organized by UCF section headings, including solicitation/contract subject matter where feasible.)					
DUNS Number: 829076913					
The purpose of this modification to the FY 17 Task Order is to provide additional funding for detention services for ICE detainees at the Otero County Processing Center under the provisions of the Otero County, New Mexico Intergovernmental Service Agreement (IGSA) EROIGSA-14-0001. Funding in the amount of (b)(4) is provided.					
The period of performance will also change: From: March 01, 2017 through February 28, 2018 To: February 1, 2017 to January 31, 2018					
Continued ...					
Except as provided herein, all terms and conditions of the document referenced in Item 9 A or 10A, as heretofore changed, remains unchanged and in full force and effect.					
15A. NAME AND TITLE OF SIGNER (Type or print)			16A. NAME AND TITLE OF CONTRACTING OFFICER (Type or print)		
			(b)(6);(b)(7)(C)		
15B. CONTRACTOR/OFFEROR		15C. DATE SIGNED		16C. DATE SIGNED	
(Signature of person authorized to sign)				5/25/2017	
		(Signature of Contracting Officer)			
NSN 7540-01-152-8070 Previous edition unusable					
STANDARD FORM 30 (REV. 10-83) Prescribed by GSA FAR (48 CFR) 53.243					

NAME OF OFFEROR OR CONTRACTOR
COUNTY OF OTERO

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>Field Office Point of Contact: (b)(6),(b)(7)(C)</p> <p>915-856 (b)(6),(b)(7)(C)</p> <p>Alternate Field Office POC: (b)(6),(b)(7)(C) 915 856 (b)(6),(b)(7)(C)</p> <p>Contracting Officer's Representative (COR) (b)(6),(b)(7)(C)</p> <p>(b)(6),(b)(7)(C) (915) 834 (b)(6),(b)(7)(C)</p> <p>Alternate COR: (b)(6),(b)(7)(C) (915) 834- (b)(6),(b)(7)(C)</p> <p>Contracting Officer: (b)(6),(b)(7)(C) (202) 732-2 (b)(6),(b)(7)(C)</p> <p>The obligated amount of this Task Order has increased: From (b)(4)</p> <p>By:</p> <p>To:</p> <p>The funding provided in this modification is the amount presently available for payment and allotted to this task order. The service provider agrees to perform to the point that does not exceed the total amount currently allotted to the items currently funded under this task order. The service provider is not authorized to continue to work on those item(s) beyond that point. The Government will not be obligated to reimburse the service provider in excess of the amount allotted to those item(s) for performance beyond the funding allotted.</p> <p>*****</p> <p>Exempt Action: Y Sensitive Award: SPII</p> <p>Delivery: 30 Days After Award</p> <p>Discount Terms:</p> <p style="padding-left: 40px;">Net 30</p> <p>Delivery Location Code: ICE/ERO</p> <p>ICE ENFORCEMENT REMOVAL</p> <p>IMMIGRATION AND CUSTOMS ENFORCEMENT</p> <p>801 I STREET NW</p> <p>SUITE 900</p> <p>WASHINGTON DC 20536</p> <p>FOB: Destination</p> <p>Period of Performance: 02/01/2017 to 01/31/2018</p> <p>Change Item 0001 to read as follows (amount shown is the total amount):</p> <p style="padding-left: 100px;">(b)(4)</p> <p>0001 DETAINEE HOUSING Bed day rate: (b)(4) Day (1-850 and 1000+ detainees)</p> <p>Continued ...</p>				2,215,396.82

NAME OF OFFEROR OR CONTRACTOR
COUNTY OF OTERO

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>Beds Funded has increased: From (b)(4) By: To:</p> <p>Funding for this CLIN has increased: From (b)(4) By: To:</p> <p>Accounting Info: (b)(7)(E) ---</p> <p>Funded: \$0.00 Accounting Info: (b)(7)(E) ---</p> <p>Funded (b)(4)</p> <p>Change Item 0006 to read as follows (amount shown is the total amount):</p>				
0006	<p>Medical, Dental, and Check Cashing Transportation (effective 3/1/2016) at a rate of (b)(4) per month.</p> <p>Funding provided has increased: From (b)(4) By: To:</p> <p>Accounting Info: (b)(7)(E) ---</p> <p>Funded: \$0.00 Accounting Info: (b)(7)(E) ---</p> <p>Funded (b)(4)</p> <p>*****</p> <p>Invoicing Instructions: Service Providers/Contractors shall use these procedures when submitting an invoice. 1. Invoice Submission: Invoices shall be submitted in a .pdf format on a monthly basis via Continued ...</p>				13,805.00

NAME OF OFFEROR OR CONTRACTOR
COUNTY OF OTERO

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>email to: Invoice.Consolidation@ice.dhs.gov Each email shall contain only one (1) invoice and the subject line of the email will annotate the invoice number. The emailed invoice shall include the 'bill to' address shown below:</p> <p>DHS, ICE Financial Operations - Burlington P.O. Box 1620 ATTN: ICE-ERO-FOD-FEP Williston, VT 05495-1620</p> <p>Note: the Service Provider's or Contractor's Dunn and Bradstreet (D&B) DUNS Number must be registered in the System for Award Management (SAM) at https://www.sam.gov prior to award and shall be notated on every invoice submitted to ensure prompt payment provisions are met. The ICE program office identified in the task order/contract shall also be notated on every invoice.</p> <p>2. Content of Invoices: Each invoice submission shall contain the following information: (i) Name and address of the Service Provider/Contractor. Note: the name, address and DUNS number on the invoice MUST match the information in both the Contract/Agreement and the information in the SAM. If payment is remitted to another entity, the name, address and DUNS information of that entity must also be provided which will require Government verification before payment can be processed; (ii) Dunn and Bradstreet (D&B) DUNS Number; (iii) Invoice date and invoice number; (iv) Agreement/Contract number, contract line item number and, if applicable, the order number; (v) Description, quantity, unit of measure, unit price, extended price and period of performance of the items or services delivered; (vi) Shipping number and date of shipment, including the bill of lading number and weight of shipment if shipped on Government bill of lading; (vii) Terms of any discount for prompt payment offered; (viii) Remit to Address; (ix) Name, title, and phone number of person to notify in event of defective invoice; and</p> <p>Continued ...</p>				

CONTINUATION SHEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED EROIGSA-14-0001, /HSCEDM-17-F-IG138/P00001	PAGE OF 5 7
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NAME OF OFFEROR OR CONTRACTOR
COUNTY OF OTERO

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>3. Invoice Supporting Documentation. In order to ensure payment, the vendor must also submit supporting documentation to the Contracting Officer's Representative (COR) identified in the contract as described below. Supporting documentation shall be submitted to the COR or contract Point of Contact (POC) identified in the contract or task order with all invoices, as appropriate. See paragraph 4 for details regarding the safeguarding of information. Invoices without documentation to support invoiced items, containing charges for items outside the scope of the contract, or not based on the most recent contract base or modification rates will be considered improper and returned for resubmission. Supporting documentation requirements include:</p> <p>(i) Firm Fixed Price Items (items not subject to any adjustment on the basis of the contractor's cost experience, such as pre-established monthly guaranteed minimums for detention or transportation): do not require detailed supporting documentation unless specifically requested by the Government.</p> <p>(ii) Fixed Unit Price Items (items for allowable incurred costs, such as detention and/or transportation services with no defined minimum quantities, stationary guard or escort services, transportation mileage or other Minor Charges such as sack lunches and detainee wages): shall be fully supported with documentation substantiating the costs and/or reflecting the established price in the contract and submitted in .pdf format.</p> <p>(iii) Detention Services:</p> <p>(1) Bed day rate;</p> <p>(2) Resident's/detainee's check-in and check-out dates;</p> <p>(3) Number of bed days multiplied by the bed day rate;</p> <p>(4) Name of each detainee;</p> <p>(5) Resident's/detainee's identification information</p> <p>(iv) Transportation Services:</p> <p>(1) The mileage rate being applied for that invoice.</p> <p>(2) Monthly billing reports listing transportation services provided; number of miles; transportation routes provided; locations serviced and/or names/numbers of detainees</p> <p>Continued ...</p>				

NAME OF OFFEROR OR CONTRACTOR
COUNTY OF OTERO

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>transported; an itemized listing of all other charges; and, for reimbursable expenses (e.g. travel expenses, special meals, etc.) copies of all receipts.</p> <p>(v) Stationary Guard Services: (1) The itemized monthly invoice shall state the number of hours being billed, the duration of the billing (times and dates) and the name of the resident(s)/detainee(s) that was/were guarded.</p> <p>(vi) Other Direct Charges: The invoice shall include appropriate supporting documentation for any direct charge billed for reimbursement.</p> <p>4. Safeguarding Information: As a contractor or vendor conducting business with Immigration and Customs Enforcement (ICE), you are required to comply with DHS Policy regarding the safeguarding of Sensitive Personally Identifiable Information (PII). Sensitive PII is information that identifies an individual, including an alien, and could result in harm, embarrassment, inconvenience or unfairness. Examples of Sensitive PII include information such as: Social Security Numbers, Alien Registration Numbers (A-Numbers), or combinations of information such as the individual's name or other unique identifier and full date of birth, citizenship, or immigration status.</p> <p>As part of your obligation to safeguard information, the follow precautions are required: (i) Email supporting documents containing Sensitive PII in an encrypted attachment with password sent separately. (ii) Never leave paper documents containing Sensitive PII unattended and unsecure. When not in use, these documents will be locked in drawers, cabinets, desks, etc. so the information is not accessible to those without a need to know. (iii) Use shredders when discarding paper documents containing Sensitive PII. (iv) Refer to the DHS Handbook for Safeguarding Sensitive Personally Identifiable Information (March 2012) found at (b)(7)(E)</p> <p>f for more information on and/or examples of Sensitive PII.</p> <p>5. If you have questions regarding payment, Continued ...</p>				

CONTINUATION SHEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED	PAGE	OF
	EROIGSA-14-0001, /HSCEDM-17-F-IG138/P00001	7	7

NAME OF OFFEROR OR CONTRACTOR
COUNTY OF OTERO

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>please contact ICE Financial Operations at 1-877-491-6521 or by e-mail at OCFO.CustomerService@ice.dhs.gov</p>				

AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT		1. CONTRACT ID CODE		PAGE OF PAGES 1 6	
2. AMENDMENT/MODIFICATION NO. P00002		3. EFFECTIVE DATE See Block 16C		4. REQUISITION/PURCHASE REQ. NO. 192117FEP00000595	
5. PROJECT NO. (If applicable)		6. ISSUED BY ICE/DCR		7. ADMINISTERED BY (If other than Item 6) ICE/DCR	
ICE/DETENTION COMPLIANCE REMOVALS IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 801 I STREET NW SUITE (b)(6)(b)(7)(C) WASHINGTON DC 20536		ICE/DETENTION COMPLIANCE REMOVALS IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 801 I STREET NW SUITE (b)(6)(b)(7)(C) WASHINGTON DC 20536			
8. NAME AND ADDRESS OF CONTRACTOR (No., street, county, State and ZIP Code) COUNTY OF OTERO 26 MCGREGOR RANGE RD CHAPARRAL NM 880817753		(x) 9A. AMENDMENT OF SOLICITATION NO.		9B. DATED (SEE ITEM 11)	
CODE 8290769130000 FACILITY CODE		x 10A. MODIFICATION OF CONTRACT/ORDER NO. EROIGSA-14-0001, HSCEDM-17-F-IG138		10B. DATED (SEE ITEM 13) 03/20/2017	
11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS					

☐ The above numbered solicitation is amended as set forth in Item 14. The hour and date specified for receipt of Offers ☐ is extended. ☐ is not extended.
Offers must acknowledge receipt of this amendment prior to the hour and date specified in the solicitation or as amended, by one of the following methods: (a) By completing Items 8 and 15, and returning _____ copies of the amendment; (b) By acknowledging receipt of this amendment on each copy of the offer submitted; or (c) By separate letter or telegram which includes a reference to the solicitation and amendment numbers. FAILURE OF YOUR ACKNOWLEDGEMENT TO BE RECEIVED AT THE PLACE DESIGNATED FOR THE RECEIPT OF OFFERS PRIOR TO THE HOUR AND DATE SPECIFIED MAY RESULT IN REJECTION OF YOUR OFFER. If by virtue of this amendment you desire to change an offer already submitted, such change may be made by telegram or letter, provided each telegram or letter makes reference to the solicitation and this amendment, and is received prior to the opening hour and date specified.

12. ACCOUNTING AND APPROPRIATION DATA (If required)
See Schedule

Net Increase: (b)(4)

13. THIS ITEM ONLY APPLIES TO MODIFICATION OF CONTRACTS/ORDERS. IT MODIFIES THE CONTRACT/ORDER NO. AS DESCRIBED IN ITEM 14.

CHECK ONE	A. THIS CHANGE ORDER IS ISSUED PURSUANT TO: (Specify authority) THE CHANGES SET FORTH IN ITEM 14 ARE MADE IN THE CONTRACT ORDER NO. IN ITEM 10A.
	B. THE ABOVE NUMBERED CONTRACT/ORDER IS MODIFIED TO REFLECT THE ADMINISTRATIVE CHANGES (such as changes in paying office, appropriation date, etc.) SET FORTH IN ITEM 14, PURSUANT TO THE AUTHORITY OF FAR 43.103(b).
	C. THIS SUPPLEMENTAL AGREEMENT IS ENTERED INTO PURSUANT TO AUTHORITY OF:
X	D. OTHER (Specify type of modification and authority) Unilateral Funding Modification

E. IMPORTANT: Contractor ☒ is not. ☐ is required to sign this document and return _____ copies to the issuing office.

14. DESCRIPTION OF AMENDMENT/MODIFICATION (Organized by UCF section headings, including solicitation/contract subject matter where feasible.)
DUNS Number: 829076913

The purpose of this modification to the FY 17 Task Order is to create CLIN 0006A and CLIN 0006B for Stationary Guard Services Regular and Overtime Rate and also to provide additional funding for detention services for ICE detainees at the Otero County Processing Center under the provisions of the Otero County, New Mexico Intergovernmental Service Agreement (IGSA) EROIGSA-14-0001. Funding in the amount of \$(b)(4) provided.

The period of performance will also change:
From: March 01, 2017 through February 28, 2018
To: February 1, 2017 to January 31, 2018
Continued ...

Except as provided herein, all terms and conditions of the document referenced in Item 9 A or 10A, as heretofore changed, remains unchanged and in full force and effect.

15A. NAME AND TITLE OF SIGNER (Type or print) A (b)(6)(b)(7)(C)		16. (b)(6)(b)(7)(C)	
15B. CONTRACTOR/OFFEROR (Signature of person authorized to sign)		15C. DATE SIGNED 16	
		16C. DATE SIGNED 7/6/2017	

NSN 7540-01-152-8070
Previous edition unusable

STANDARD FORM 30 (REV. 10-83)
Prescribed by GSA
FAR (48 CFR) 53.243

CONTINUATION SHEET

REFERENCE NO. OF DOCUMENT BEING CONTINUED

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NAME OF OFFEROR OR CONTRACTOR

COUNTY OF OTERO

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>Field Office Point of Contact (b)(6);(b)(7)(C)</p> <p>915-856-(b)(6);(b)(7)(C)</p> <p>Alternate Field Office POC: (b)(6);(b)(7)(C) 915</p> <p>856-(b)(6);(b)(7)(C)</p> <p>Contracting Officer's Representative (COR): (b)(6);(b)(7)(C) (915) 834-(b)(6);(b)(7)(C)</p> <p>Alternate COR: (b)(6);(b)(7)(C) (915) 834-(b)(6);(b)(7)(C)</p> <p>Contracting Officer (b)(6);(b)(7)(C) (202) 732-(b)(6);(b)(7)(C)</p> <p>The obligated amount of this Task Order has increased:</p> <p>From (b)(4)</p> <p>By:</p> <p>To:</p> <p>The funding provided in this modification is the amount presently available for payment and allotted to this task order. The service provider agrees to perform to the point that does not exceed the total amount currently allotted to the items currently funded under this task order. The service provider is not authorized to continue to work on those item(s) beyond that point. The Government will not be obligated to reimburse the service provider in excess of the amount allotted to those item(s) for performance beyond the funding allotted.</p> <p>*****</p> <p>Exempt Action: Y Sensitive Award: SPII</p> <p>Delivery: 30 Days After Award</p> <p>Discount Terms:</p> <p>Net 30</p> <p>Delivery Location Code: ICE/ERO</p> <p>ICE ENFORCEMENT REMOVAL</p> <p>IMMIGRATION AND CUSTOMS ENFORCEMENT</p> <p>801 I STREET NW</p> <p>SUITE 900</p> <p>WASHINGTON DC 20536</p> <p>Accounting Info:</p> <p>(b)(7)(E)</p> <p>FOB: Destination</p> <p>Period of Performance: 02/01/2017 to 01/31/2018</p> <p>Change Item 0006 to read as follows (amount shown Continued ...</p>				

CONTINUATION SHEET

REFERENCE NO. OF DOCUMENT BEING CONTINUED

EROIGSA-14-0001, /HSCEDM-17-F-IG138/P00002

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NAME OF OFFEROR OR CONTRACTOR

COUNTY OF OTERO

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	is the total amount):				
0006	Medical, Dental, and Check Cashing Transportation (effective 3/1/2016) at a rate of \$(b)(4) per month. Funding provided has increased: From: (b)(4) By: To: Add Item 0006A as follows:				110,440.00
0006A	Stationary Guard Rate (b)(4) per hour Funding has increased: From: \$0.00 By: (b)(4) To: Add Item 0006B as follows:			(b)(4)	6,307.08
0006B	Overtime Stationary Guard Rate (b)(4) per hour Funding has increased: From: \$0.00 By: (b)(4) To: ***** Invoicing Instructions: Service Providers/Contractors shall use these procedures when submitting an invoice. 1. Invoice Submission: Invoices shall be submitted in a .pdf format on a monthly basis via email to: Invoice.Consolidation@ice.dhs.gov Each email shall contain only one (1) invoice and the subject line of the email will annotate the invoice number. The emailed invoice shall include the 'bill to' address shown below: Continued ...			(b)(4)	6,325.74

NAME OF OFFEROR OR CONTRACTOR
COUNTY OF OTERO

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>DHS, ICE Financial Operations - Burlington P.O. Box 1620 ATTN: ICE-ERO-FOD-FEP Williston, VT 05495-1620</p> <p>Note: the Service Provider's or Contractor's Dunn and Bradstreet (D&B) DUNS Number must be registered in the System for Award Management (SAM) at https://www.sam.gov prior to award and shall be notated on every invoice submitted to ensure prompt payment provisions are met. The ICE program office identified in the task order/contract shall also be notated on every invoice.</p> <p>2. Content of Invoices: Each invoice submission shall contain the following information: (i) Name and address of the Service Provider/Contractor. Note: the name, address and DUNS number on the invoice MUST match the information in both the Contract/Agreement and the information in the SAM. If payment is remitted to another entity, the name, address and DUNS information of that entity must also be provided which will require Government verification before payment can be processed; (ii) Dunn and Bradstreet (D&B) DUNS Number; (iii) Invoice date and invoice number; (iv) Agreement/Contract number, contract line item number and, if applicable, the order number; (v) Description, quantity, unit of measure, unit price, extended price and period of performance of the items or services delivered; (vi) Shipping number and date of shipment, including the bill of lading number and weight of shipment if shipped on Government bill of lading; (vii) Terms of any discount for prompt payment offered; (viii) Remit to Address; (ix) Name, title, and phone number of person to notify in event of defective invoice; and</p> <p>3. Invoice Supporting Documentation. In order to ensure payment, the vendor must also submit supporting documentation to the Contracting Officer's Representative (COR) identified in the contract as described below. Supporting documentation shall be submitted to the COR or contract Point of Contact (POC) identified in the Continued ...</p>				

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NAME OF OFFEROR OR CONTRACTOR

COUNTY OF OTERO

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>contract or task order with all invoices, as appropriate. See paragraph 4 for details regarding the safeguarding of information. Invoices without documentation to support invoiced items, containing charges for items outside the scope of the contract, or not based on the most recent contract base or modification rates will be considered improper and returned for resubmission. Supporting documentation requirements include:</p> <p>(i) Firm Fixed Price Items (items not subject to any adjustment on the basis of the contractor's cost experience, such as pre-established monthly guaranteed minimums for detention or transportation): do not require detailed supporting documentation unless specifically requested by the Government.</p> <p>(ii) Fixed Unit Price Items (items for allowable incurred costs, such as detention and/or transportation services with no defined minimum quantities, stationary guard or escort services, transportation mileage or other Minor Charges such as sack lunches and detainee wages): shall be fully supported with documentation substantiating the costs and/or reflecting the established price in the contract and submitted in .pdf format.</p> <p>(iii) Detention Services:</p> <p>(1) Bed day rate;</p> <p>(2) Resident's/detainee's check-in and check-out dates;</p> <p>(3) Number of bed days multiplied by the bed day rate;</p> <p>(4) Name of each detainee;</p> <p>(5) Resident's/detainee's identification information</p> <p>(iv) Transportation Services:</p> <p>(1) The mileage rate being applied for that invoice.</p> <p>(2) Monthly billing reports listing transportation services provided; number of miles; transportation routes provided; locations serviced and/or names/numbers of detainees transported; an itemized listing of all other charges; and, for reimbursable expenses (e.g. travel expenses, special meals, etc.) copies of all receipts.</p> <p>(v) Stationary Guard Services:</p> <p>(1) The itemized monthly invoice shall state the number of hours being billed, the duration of the Continued ...</p>				

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REFERENCE NO. OF DOCUMENT BEING CONTINUED

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NAME OF OFFEROR OR CONTRACTOR

COUNTY OF OTERO

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>billing (times and dates) and the name of the resident(s)/detainee(s) that was/were guarded.</p> <p>(vi) Other Direct Charges: The invoice shall include appropriate supporting documentation for any direct charge billed for reimbursement.</p> <p>4. Safeguarding Information: As a contractor or vendor conducting business with Immigration and Customs Enforcement (ICE), you are required to comply with DHS Policy regarding the safeguarding of Sensitive Personally Identifiable Information (PII). Sensitive PII is information that identifies an individual, including an alien, and could result in harm, embarrassment, inconvenience or unfairness. Examples of Sensitive PII include information such as: Social Security Numbers, Alien Registration Numbers (A-Numbers), or combinations of information such as the individual's name or other unique identifier and full date of birth, citizenship, or immigration status.</p> <p>As part of your obligation to safeguard information, the follow precautions are required:</p> <p>(i) Email supporting documents containing Sensitive PII in an encrypted attachment with password sent separately.</p> <p>(ii) Never leave paper documents containing Sensitive PII unattended and unsecure. When not in use, these documents will be locked in drawers, cabinets, desks, etc. so the information is not accessible to those without a need to know.</p> <p>(iii) Use shredders when discarding paper documents containing Sensitive PII.</p> <p>(iv) Refer to the DHS Handbook for Safeguarding Sensitive Personally Identifiable Information (March 2012) found at</p> <p>(b)(7)(E)</p> <p>1 for more information on and/or examples of Sensitive PII.</p> <p>5. If you have questions regarding payment, please contact ICE Financial Operations at 1-877-491-6521 or by e-mail at OCFO.CustomerService@ice.dhs.gov</p>				

AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT		1. CONTRACT ID CODE		PAGE OF PAGES	
2 AMENDMENT/MODIFICATION NO. P00005		3 EFFECTIVE DATE See Block 16C		4 REQUISITION/PURCHASE REQ NO 192117FEP00000694.1	
5 PROJECT NO (If applicable) 1		6 ISSUED BY ICE/DCR		7 ADMINISTERED BY (If other than Item 6) ICE/DCR	
ICE/DETENTION COMPLIANCE REMOVALS IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 801 I STREET NW SUITE (b)(6),(b)(7)(C) WASHINGTON DC 20536		ICE/DETENTION COMPLIANCE REMOVALS IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 801 I STREET NW SUITE (b)(6),(b)(7) WASHINGTON DC 20536			
8 NAME AND ADDRESS OF CONTRACTOR (No. street, county, State and ZIP Code) COUNTY OF OTERO 26 MCGREGOR RANGE RD CHAPARRAL NM 880817753		(x) 9A AMENDMENT OF SOLICITATION NO.		9B DATED (SEE ITEM 11)	
CODE 8290769130000		FACILITY CODE		10A MODIFICATION OF CONTRACT/ORDER NO. EROIGSA-14-0001, HSCEDM-17-F-IG138 10B DATED (SEE ITEM 13) 03/20/2017	

11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS

☐ The above numbered solicitation is amended as set forth in Item 14. The hour and date specified for receipt of Offers ☐ is extended. ☐ is not extended. Offers must acknowledge receipt of this amendment prior to the hour and date specified in the solicitation or as amended, by one of the following methods: (a) By completing Items 8 and 15, and returning _____ copies of the amendment; (b) By acknowledging receipt of this amendment on each copy of the offer submitted; or (c) By separate letter or telegram which includes a reference to the solicitation and amendment numbers. FAILURE OF YOUR ACKNOWLEDGEMENT TO BE RECEIVED AT THE PLACE DESIGNATED FOR THE RECEIPT OF OFFERS PRIOR TO THE HOUR AND DATE SPECIFIED MAY RESULT IN REJECTION OF YOUR OFFER. If by virtue of this amendment you desire to change an offer already submitted, such change may be made by telegram or letter, provided each telegram or letter makes reference to the solicitation and this amendment, and is received prior to the opening hour and date specified.

12 ACCOUNTING AND APPROPRIATION DATA (If required) Net Increase: \$1,999,905.18
See Schedule

13. THIS ITEM ONLY APPLIES TO MODIFICATION OF CONTRACTS/ORDERS. IT MODIFIES THE CONTRACT/ORDER NO. AS DESCRIBED IN ITEM 14.

CHECK ONE	A. THIS CHANGE ORDER IS ISSUED PURSUANT TO: (Specify authority) THE CHANGES SET FORTH IN ITEM 14 ARE MADE IN THE CONTRACT ORDER NO. IN ITEM 10A.
	B. THE ABOVE NUMBERED CONTRACT/ORDER IS MODIFIED TO REFLECT THE ADMINISTRATIVE CHANGES (such as changes in paying office, appropriation date, etc.) SET FORTH IN ITEM 14, PURSUANT TO THE AUTHORITY OF FAR 43.103(b).
	C. THIS SUPPLEMENTAL AGREEMENT IS ENTERED INTO PURSUANT TO AUTHORITY OF:
X	D. OTHER (Specify type of modification and authority) Unilateral Funding Modification

E. IMPORTANT: Contractor ☒ is not ☐ is required to sign this document and return _____ copies to the issuing office

14. DESCRIPTION OF AMENDMENT/MODIFICATION (Organized by UCF section headings, including solicitation/contract subject matter where feasible)

DUNS Number: 829076913

Field Office Point of Contact: (b)(6),(b)(7)(C) 915-856-(b)(6),(b)(7)(C)
Alternate Field Office POC: (b)(6),(b)(7)(C) 915-856-(b)(6),(b)(7)(C)
Contracting Officer's Representative (COR): (b)(6),(b)(7)(C) 915) 834-(b)(6),(b)(7)(C)
Alternate COR: (b)(6),(b)(7)(C) (915) 83-(b)(6),(b)(7)(C)
Contracting Officer: (b)(6),(b)(7)(C) (202) 71-(b)(6),(b)(7)(C)

The purpose of this modification to the FY 17 Task Order is to provide additional funding for detention services for ICE detainees at the Otero County Processing Center under the provisions of the Otero County, New Mexico Intergovernmental Service Agreement (IGSA) EROIGSA-14-0001. Funding in the amount of (b)(4) is provided.

Continued ...

Except as provided herein, all terms and conditions of the document referenced in Item 9 A or 10A, as heretofore changed, remains unchanged and in full force and effect.

15A. NAME AND TITLE OF SIGNER (Type or print) (b)(6),(b)(7)(C)		15B. CONTRACTOR/OFFEROR (Signature of person authorized to sign)		15C. DATE SIGNED (b)(6),(b)(7)(C)		16C. DATE SIGNED 9/5/2017	
---	--	---	--	--------------------------------------	--	------------------------------	--

NSN 7540-01-152-8070
Previous edition unusable

STANDARD FORM 30 (REV. 10-83)
Prescribed by GSA
FAR (48 CFR) 53.243

NAME OF OFFEROR OR CONTRACTOR
COUNTY OF OTERO

ITEM NO (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>The obligated amount of this Task Order has increased: From (b)(4) By: To:</p> <p>The funding provided in this modification is the amount presently available for payment and allotted to this task order. The service provider agrees to perform to the point that does not exceed the total amount currently allotted to the items currently funded under this task order. The service provider is not authorized to continue to work on those item(s) beyond that point. The Government will not be obligated to reimburse the service provider in excess of the amount allotted to those item(s) for performance beyond the funding allotted.</p> <p>*****</p> <p>Exempt Action: Y Sensitive Award: SPII Delivery: 30 Days After Award Discount Terms: Net 30 Delivery Location Code: ICE/ERO ICE ENFORCEMENT REMOVAL IMMIGRATION AND CUSTOMS ENFORCEMENT 801 I STREET NW SUITE 900 WASHINGTON DC 20536</p> <p>FOB: Destination Period of Performance: 02/01/2017 to 01/31/2018</p> <p>Change Item 0001 to read as follows (amount shown is the total amount):</p>				
0001	<p>DETAINEE HOUSING Bed day rate: (b)(4) / Day (1-850 and 1000+ detainees)</p> <p>Beds Funded has increased: From (b)(4) By: To:</p> <p>Funding for this CLIN has increased: From (b)(4) By: To: Continued ...</p>				1,999,905.18

NAME OF OFFEROR OR CONTRACTOR
COUNTY OF OTERO

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	Accounting Info: (b)(7)(E) <div style="background-color: black; width: 350px; height: 30px; margin-top: 5px;"></div> Funded: \$0.00 Accounting Info: (b)(7)(E) <div style="background-color: black; width: 380px; height: 30px; margin-top: 5px;"></div> Funded: \$0.00 Accounting Info: (b)(7)(E) <div style="background-color: black; width: 360px; height: 30px; margin-top: 5px;"></div> Funded: \$0.00 Accounting Info: (b)(7)(E) <div style="background-color: black; width: 370px; height: 30px; margin-top: 5px;"></div> Funded: \$0.00 Accounting Info: (b)(7)(E) <div style="background-color: black; width: 380px; height: 30px; margin-top: 5px;"></div> Funded: (b)(7)(E) <div style="background-color: black; width: 100px; height: 15px; margin-top: 5px;"></div> <p>*****</p> Invoicing Instructions: Service Providers/Contractors shall use these procedures when submitting an invoice. 1. Invoice Submission: Invoices shall be submitted in a .pdf format on a monthly basis via email to: Invoice.Consolidation@ice.dhs.gov Each email shall contain only one (1) invoice and the subject line of the email will annotate the invoice number. The emailed invoice shall include the 'bill to' address shown below: DHS, ICE Financial Operations - Burlington P.O. Box 1620 ATTN: ICE-ERO-FOD-FEP Williston, VT 05495-1620 Note: the Service Provider's or Contractor's Dunn and Bradstreet (D&B) DUNS Number must be registered in the System for Award Management (SAM) at https://www.sam.gov prior to award and Continued ...				

CONTINUATION SHEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED EROIGSA-14-0001, /HSCEDM-17-F-IG138/P00005	PAGE	OF
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NAME OF OFFEROR OR CONTRACTOR
COUNTY OF OTERO

ITEM NO (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>shall be notated on every invoice submitted to ensure prompt payment provisions are met. The ICE program office identified in the task order/contract shall also be notated on every invoice.</p> <p>2. Content of Invoices: Each invoice submission shall contain the following information:</p> <p>(i) Name and address of the Service Provider/Contractor. Note: the name, address and DUNS number on the invoice MUST match the information in both the Contract/Agreement and the information in the SAM. If payment is remitted to another entity, the name, address and DUNS information of that entity must also be provided which will require Government verification before payment can be processed;</p> <p>(ii) Dunn and Bradstreet (D&B) DUNS Number;</p> <p>(iii) Invoice date and invoice number;</p> <p>(iv) Agreement/Contract number, contract line item number and, if applicable, the order number;</p> <p>(v) Description, quantity, unit of measure, unit price, extended price and period of performance of the items or services delivered;</p> <p>(vi) Shipping number and date of shipment, including the bill of lading number and weight of shipment if shipped on Government bill of lading;</p> <p>(vii) Terms of any discount for prompt payment offered;</p> <p>(viii) Remit to Address;</p> <p>(ix) Name, title, and phone number of person to notify in event of defective invoice; and</p> <p>3. Invoice Supporting Documentation. In order to ensure payment, the vendor must also submit supporting documentation to the Contracting Officer's Representative (COR) identified in the contract as described below. Supporting documentation shall be submitted to the COR or contract Point of Contact (POC) identified in the contract or task order with all invoices, as appropriate. See paragraph 4 for details regarding the safeguarding of information. Invoices without documentation to support invoiced items, containing charges for items outside the scope of the contract, or not based on the most recent contract base or modification rates will be considered improper and returned for resubmission. Supporting documentation requirements include:</p> <p>Continued ...</p>				

CONTINUATION SHEET	REFERENCE NO OF DOCUMENT BEING CONTINUED EROIGSA-14-0001,/HSCEDM-17-F-IG138/P00005	PAGE	OF
		5	6

NAME OF OFFEROR OR CONTRACTOR
COUNTY OF OTERO

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>(i) Firm Fixed Price Items (items not subject to any adjustment on the basis of the contractor's cost experience, such as pre-established monthly guaranteed minimums for detention or transportation): do not require detailed supporting documentation unless specifically requested by the Government.</p> <p>(ii) Fixed Unit Price Items (items for allowable incurred costs, such as detention and/or transportation services with no defined minimum quantities, stationary guard or escort services, transportation mileage or other Minor Charges such as sack lunches and detainee wages): shall be fully supported with documentation substantiating the costs and/or reflecting the established price in the contract and submitted in .pdf format.</p> <p>(iii) Detention Services:</p> <p>(1) Bed day rate;</p> <p>(2) Resident's/detainee's check-in and check-out dates;</p> <p>(3) Number of bed days multiplied by the bed day rate;</p> <p>(4) Name of each detainee;</p> <p>(5) Resident's/detainee's identification information</p> <p>(iv) Transportation Services:</p> <p>(1) The mileage rate being applied for that invoice.</p> <p>(2) Monthly billing reports listing transportation services provided; number of miles; transportation routes provided; locations serviced and/or names/numbers of detainees transported; an itemized listing of all other charges; and, for reimbursable expenses (e.g. travel expenses, special meals, etc.) copies of all receipts.</p> <p>(v) Stationary Guard Services:</p> <p>(1) The itemized monthly invoice shall state the number of hours being billed, the duration of the billing (times and dates) and the name of the resident(s)/detainee(s) that was/were guarded.</p> <p>(vi) Other Direct Charges:</p> <p>The invoice shall include appropriate supporting documentation for any direct charge billed for reimbursement.</p> <p>4. Safeguarding Information: As a contractor or vendor conducting business with Immigration and Customs Enforcement (ICE), you are required to Continued ...</p>				

NAME OF OFFEROR OR CONTRACTOR
COUNTY OF OTERO

ITEM NO (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>comply with DHS Policy regarding the safeguarding of Sensitive Personally Identifiable Information (PII). Sensitive PII is information that identifies an individual, including an alien, and could result in harm, embarrassment, inconvenience or unfairness. Examples of Sensitive PII include information such as: Social Security Numbers, Alien Registration Numbers (A-Numbers), or combinations of information such as the individual's name or other unique identifier and full date of birth, citizenship, or immigration status.</p> <p>As part of your obligation to safeguard information, the follow precautions are required:</p> <p>(i) Email supporting documents containing Sensitive PII in an encrypted attachment with password sent separately.</p> <p>(ii) Never leave paper documents containing Sensitive PII unattended and unsecure. When not in use, these documents will be locked in drawers, cabinets, desks, etc. so the information is not accessible to those without a need to know.</p> <p>(iii) Use shredders when discarding paper documents containing Sensitive PII.</p> <p>(iv) Refer to the DHS Handbook for Safeguarding Sensitive Personally Identifiable Information (March 2012) found at</p> <div style="background-color: black; color: red; padding: 2px;">(b)(7)(E)</div> <p>f for more information on and/or examples of Sensitive PII.</p> <p>5. If you have questions regarding payment, please contact ICE Financial Operations at 1-877-491-6521 or by e-mail at OCFO.CustomerService@ice.dhs.gov</p>				

AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT		1. CONTRACT ID CODE		PAGE OF PAGES	
				1 6	
2. AMENDMENT/MODIFICATION NO. P00006		3. EFFECTIVE DATE See Block 16C		4. REQUISITION/PURCHASE REQ. NO. 192118FEP00000007	
6. ISSUED BY		CODE		5. PROJECT NO. (If applicable)	
ICE/DCR		ICE/DCR			
ICEDETENTION COMPLIANCE REMOVALS IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 801 I STREET NW SUITE (b)(6);(b)(7)(C) WASHINGTON DC 20536		ICEDETENTION COMPLIANCE REMOVALS IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 801 I STREET NW SUITE (b)(6);(b)(7)(C) WASHINGTON DC 20536			
8. NAME AND ADDRESS OF CONTRACTOR (No., street, county, State and ZIP Code)		(x) 9A. AMENDMENT OF SOLICITATION NO.			
COUNTY OF OTERO 26 MCGREGOR RANGE RD CHAPARRAL NM 880817753		9B. DATED (SEE ITEM 11)			
		x 10A. MODIFICATION OF CONTRACT/ORDER NO. EROIGSA-14-0001, HSCEDM-17-F-IG138			
		10B. DATED (SEE ITEM 13) 03/20/2017			
CODE 8290769130000		FACILITY CODE			

11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS

☐ The above numbered solicitation is amended as set forth in Item 14. The hour and date specified for receipt of Offers ☐ is extended. ☐ is not extended.
Offers must acknowledge receipt of this amendment prior to the hour and date specified in the solicitation or as amended, by one of the following methods: (a) By completing Items 8 and 15, and returning _____ copies of the amendment; (b) By acknowledging receipt of this amendment on each copy of the offer submitted; or (c) By separate letter or telegram which includes a reference to the solicitation and amendment numbers. FAILURE OF YOUR ACKNOWLEDGEMENT TO BE RECEIVED AT THE PLACE DESIGNATED FOR THE RECEIPT OF OFFERS PRIOR TO THE HOUR AND DATE SPECIFIED MAY RESULT IN REJECTION OF YOUR OFFER. If by virtue of this amendment you desire to change an offer already submitted, such change may be made by telegram or letter, provided each telegram or letter makes reference to the solicitation and this amendment, and is received prior to the opening hour and date specified.

12. ACCOUNTING AND APPROPRIATION DATA (If required)

Net Increase:

(b)(4)

See Schedule

13. THIS ITEM ONLY APPLIES TO MODIFICATION OF CONTRACTS/ORDERS. IT MODIFIES THE CONTRACT/ORDER NO. AS DESCRIBED IN ITEM 14.

CHECK ONE	A. THIS CHANGE ORDER IS ISSUED PURSUANT TO: (Specify authority) THE CHANGES SET FORTH IN ITEM 14 ARE MADE IN THE CONTRACT ORDER NO. IN ITEM 10A.
	B. THE ABOVE NUMBERED CONTRACT/ORDER IS MODIFIED TO REFLECT THE ADMINISTRATIVE CHANGES (such as changes in paying office, appropriation date, etc.) SET FORTH IN ITEM 14, PURSUANT TO THE AUTHORITY OF FAR 43.103(b).
	C. THIS SUPPLEMENTAL AGREEMENT IS ENTERED INTO PURSUANT TO AUTHORITY OF:
X	D. OTHER (Specify type of modification and authority) Unilateral Funding Modification

E. IMPORTANT: Contractor ☒ is not. ☐ is required to sign this document and return _____ copies to the issuing office.

14. DESCRIPTION OF AMENDMENT/MODIFICATION (Organized by UCF section headings, including solicitation/contract subject matter where feasible.)

DUNS Number: 829076913

Field Office Point of Contact: (b)(6);(b)(7)(C) 915-856- (b)(6);(b)(7)(C)

Alternate Field Office POC: (b)(6);(b)(7)(C) 915 856- (b)(6);(b)(7)(C)

Contracting Officer's Representative (COR): (b)(6);(b)(7)(C) (915) 834- (b)(6);(b)(7)(C)

Alternate COR: (b)(6);(b)(7)(C) (915) 834- (b)(6);(b)(7)(C)

Contracting Officer: (b)(6);(b)(7)(C) (202) 732- (b)(6);(b)(7)(C)

Contract Specialist: (b)(6);(b)(7)(C) (202) 732- (b)(6);(b)(7)(C)

This modification to the FY 17 Task Order is to provide additional funding for detention services for ICE detainees at the Otero County Processing Center under the provisions of the Otero County, New Mexico Intergovernmental Service Agreement (IGSA) EROIGSA-14-0001. Continued ...

Except as provided herein, all terms and conditions of the document referenced in Item 9 A or 10A, as heretofore changed, remains unchanged and in full force and effect.

15A. NAME AND TITLE OF SIGNER (Type or print)		16A. NAME AND TITLE OF CONTRACTING OFFICER (Type or print) (b)(6);(b)(7)(C)	
15B. CONTRACTOR/OFFEROR		15C. DATE SIGNED	
(Signature of person authorized to sign)			

CONTINUATION SHEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED EROIGSA-14-0001, /HSCEDM-17-F-IG138/P00006	PAGE OF 2 6
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NAME OF OFFEROR OR CONTRACTOR
COUNTY OF OTERO

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>The purpose of this modification is as follows:</p> <p>A. Incorporate Contract Line Item Number (CLIN 0001A) for Detention Services with a rate of (b)(4). This rate is in accordance with the Intergovernmental Service Agreement EROIGSA-14-0001 (P00009). (b)(4)</p> <p>B. Provide funding in the amount of (b)(4) for Detention Services (CLIN 0001A).</p> <p>C. As a result, the obligated amount of this Task Order has increased:</p> <p>From: (b)(4)</p> <p>By: \$ (b)(4)</p> <p>To: \$ (b)(4)</p> <p>The funding provided in this modification is the amount presently available for payment and allotted to this task order. The service provider agrees to perform to the point that does not exceed the total amount currently allotted to the items currently funded under this task order. The service provider is not authorized to continue to work on those item(s) beyond that point. The Government will not be obligated to reimburse the service provider in excess of the amount allotted to those item(s) for performance beyond the funding allotted.</p> <p>*****</p> <p>Exempt Action: Y Sensitive Award: SPII</p> <p>Accounting Info:</p> <p>(b)(7)(E)</p> <p>FOB: Destination</p> <p>Period of Performance: 02/01/2017 to 01/31/2018</p> <p>Add Item 0001a as follows:</p> <p>0001a Detention Services (b)(4), 682,551.55</p> <p>Bed Day Rate of (b)(4) s of October 3, 2017 and stated on P00009 of contract EROIGSA-14-0001.</p> <p>The amount for this CLIN has increased</p> <p>From: (b)(4)</p> <p>By: (b)(4)</p> <p>To: (b)(4)</p> <p>The quantity for this CLIN has increased:</p> <p>Continued ...</p>				

CONTINUATION SHEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED EROIGSA-14-0001,/HSCEDM-17-F-IG138/P00006	PAGE	OF
		3	6

NAME OF OFFEROR OR CONTRACTOR
COUNTY OF OTERO

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>(b)(4)</p> <p>From By To</p> <p>*****</p> <p>Invoicing Instructions: Service Providers/Contractors shall use these procedures when submitting an invoice. 1. Invoice Submission: Invoices shall be submitted in a .pdf format on a monthly basis via email to: Invoice.Consolidation@ice.dhs.gov Each email shall contain only one (1) invoice and the subject line of the email will annotate the invoice number. The emailed invoice shall include the 'bill to' address shown below:</p> <p>DHS, ICE Financial Operations - Burlington P.O. Box 1620 ATTN: ICE-ERO-FOD-FEP Williston, VT 05495-1620</p> <p>Note: the Service Provider's or Contractor's Dunn and Bradstreet (D&B) DUNS Number must be registered in the System for Award Management (SAM) at https://www.sam.gov prior to award and shall be notated on every invoice submitted to ensure prompt payment provisions are met. The ICE program office identified in the task order/contract shall also be notated on every invoice.</p> <p>2. Content of Invoices: Each invoice submission shall contain the following information: (i) Name and address of the Service Provider/Contractor. Note: the name, address and DUNS number on the invoice MUST match the information in both the Contract/Agreement and the information in the SAM. If payment is remitted to another entity, the name, address and DUNS information of that entity must also be provided which will require Government verification before payment can be processed; (ii) Dunn and Bradstreet (D&B) DUNS Number; (iii) Invoice date and invoice number; (iv) Agreement/Contract number, contract line item number and, if applicable, the order number; (v) Description, quantity, unit of measure, unit Continued ...</p>				

CONTINUATION SHEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED	PAGE	OF
	EROIGSA-14-0001,/HSCEDM-17-F-IG138/P00006	4	6

NAME OF OFFEROR OR CONTRACTOR
COUNTY OF OTERO

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>price, extended price and period of performance of the items or services delivered;</p> <p>(vi) Shipping number and date of shipment, including the bill of lading number and weight of shipment if shipped on Government bill of lading;</p> <p>(vii) Terms of any discount for prompt payment offered;</p> <p>(viii) Remit to Address;</p> <p>(ix) Name, title, and phone number of person to notify in event of defective invoice; and</p> <p>3. Invoice Supporting Documentation. In order to ensure payment, the vendor must also submit supporting documentation to the Contracting Officer's Representative (COR) identified in the contract as described below. Supporting documentation shall be submitted to the COR or contract Point of Contact (POC) identified in the contract or task order with all invoices, as appropriate. See paragraph 4 for details regarding the safeguarding of information. Invoices without documentation to support invoiced items, containing charges for items outside the scope of the contract, or not based on the most recent contract base or modification rates will be considered improper and returned for resubmission. Supporting documentation requirements include:</p> <p>(i) Firm Fixed Price Items (items not subject to any adjustment on the basis of the contractor's cost experience, such as pre-established monthly guaranteed minimums for detention or transportation): do not require detailed supporting documentation unless specifically requested by the Government.</p> <p>(ii) Fixed Unit Price Items (items for allowable incurred costs, such as detention and/or transportation services with no defined minimum quantities, stationary guard or escort services, transportation mileage or other Minor Charges such as sack lunches and detainee wages): shall be fully supported with documentation substantiating the costs and/or reflecting the established price in the contract and submitted in .pdf format.</p> <p>(iii) Detention Services:</p> <p>(1) Bed day rate;</p> <p>(2) Resident's/detainee's check-in and check-out dates;</p> <p>(3) Number of bed days multiplied by the bed day</p> <p>Continued ...</p>				

CONTINUATION SHEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED	PAGE	OF
	EROIGSA-14-0001,/HSCEDM-17-F-IG138/P00006	5	6

NAME OF OFFEROR OR CONTRACTOR
COUNTY OF OTERO

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>rate;</p> <p>(4) Name of each detainee;</p> <p>(5) Resident's/detainee's identification information</p> <p>(iv) Transportation Services:</p> <p>(1) The mileage rate being applied for that invoice.</p> <p>(2) Monthly billing reports listing transportation services provided; number of miles; transportation routes provided; locations serviced and/or names/numbers of detainees transported; an itemized listing of all other charges; and, for reimbursable expenses (e.g. travel expenses, special meals, etc.) copies of all receipts.</p> <p>(v) Stationary Guard Services:</p> <p>(1) The itemized monthly invoice shall state the number of hours being billed, the duration of the billing (times and dates) and the name of the resident(s)/detainee(s) that was/were guarded.</p> <p>(vi) Other Direct Charges:</p> <p>The invoice shall include appropriate supporting documentation for any direct charge billed for reimbursement.</p> <p>4. Safeguarding Information: As a contractor or vendor conducting business with Immigration and Customs Enforcement (ICE), you are required to comply with DHS Policy regarding the safeguarding of Sensitive Personally Identifiable Information (PII). Sensitive PII is information that identifies an individual, including an alien, and could result in harm, embarrassment, inconvenience or unfairness. Examples of Sensitive PII include information such as: Social Security Numbers, Alien Registration Numbers (A-Numbers), or combinations of information such as the individual's name or other unique identifier and full date of birth, citizenship, or immigration status.</p> <p>As part of your obligation to safeguard information, the follow precautions are required:</p> <p>(i) Email supporting documents containing Sensitive PII in an encrypted attachment with password sent separately.</p> <p>(ii) Never leave paper documents containing Sensitive PII unattended and unsecure. When not in use, these documents will be locked in drawers, cabinets, desks, etc. so the information is not accessible to those without a need to know.</p> <p>Continued ...</p>				

CONTINUATION SHEET

REFERENCE NO. OF DOCUMENT BEING CONTINUED

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NAME OF OFFEROR OR CONTRACTOR

COUNTY OF OTERO

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>(iii) Use shredders when discarding paper documents containing Sensitive PII.</p> <p>(iv) Refer to the DHS Handbook for Safeguarding Sensitive Personally Identifiable Information (March 2012) found at (b)(7)(E)</p> <p>f for more information on and/or examples of Sensitive PII.</p> <p>5. If you have questions regarding payment, please contact ICE Financial Operations at 1-877-491-6521 or by e-mail at OCFO.CustomerService@ice.dhs.gov</p>				

AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT		1. CONTRACT ID CODE		PAGE OF PAGES 1 6	
2. AMENDMENT/MODIFICATION NO. P00007		3. EFFECTIVE DATE See Block 16C		4. REQUISITION/PURCHASE REQ. NO. 192118FEP00000020	
6. ISSUED BY ICE/DCR		7. ADMINISTERED BY (If other than Item 6) ICE/DCR		5. PROJECT NO. (If applicable)	
ICEDETENTION COMPLIANCE REMOVALS IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 801 I STREET NW SUITE (b)(6),(b)(7)(C) WASHINGTON DC 20536		ICEDETENTION COMPLIANCE REMOVALS IMMIGRATION AND CUSTOMS ENFORCEMENT OFFICE OF ACQUISITION MANAGEMENT 801 I STREET NW SUITE (b)(6),(b)(7)(C) WASHINGTON DC 20536			
8. NAME AND ADDRESS OF CONTRACTOR (No., street, county, State and ZIP Code) COUNTY OF OTERO 26 MCGREGOR RANGE RD CHAPARRAL NM 880817753		(x)		9A. AMENDMENT OF SOLICITATION NO.	
				9B. DATED (SEE ITEM 11)	
		x		10A. MODIFICATION OF CONTRACT/ORDER NO. EROIGSA-14-0001, HSCEDM-17-F-IG138	
				10B. DATED (SEE ITEM 13) 03/20/2017	
CODE 8290769130000		FACILITY CODE			

11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS

☐ The above numbered solicitation is amended as set forth in Item 14. The hour and date specified for receipt of Offers ☐ is extended. ☐ is not extended.
Offers must acknowledge receipt of this amendment prior to the hour and date specified in the solicitation or as amended, by one of the following methods: (a) By completing Items 8 and 15, and returning _____ copies of the amendment; (b) By acknowledging receipt of this amendment on each copy of the offer submitted; or (c) By separate letter or telegram which includes a reference to the solicitation and amendment numbers. FAILURE OF YOUR ACKNOWLEDGEMENT TO BE RECEIVED AT THE PLACE DESIGNATED FOR THE RECEIPT OF OFFERS PRIOR TO THE HOUR AND DATE SPECIFIED MAY RESULT IN REJECTION OF YOUR OFFER. If by virtue of this amendment you desire to change an offer already submitted, such change may be made by telegram or letter, provided each telegram or letter makes reference to the solicitation and this amendment, and is received prior to the opening hour and date specified.

12. ACCOUNTING AND APPROPRIATION DATA (If required)
See Schedule Net Increase: (b)(4)

13. THIS ITEM ONLY APPLIES TO MODIFICATION OF CONTRACTS/ORDERS. IT MODIFIES THE CONTRACT/ORDER NO. AS DESCRIBED IN ITEM 14.

CHECK ONE	A. THIS CHANGE ORDER IS ISSUED PURSUANT TO: (Specify authority) THE CHANGES SET FORTH IN ITEM 14 ARE MADE IN THE CONTRACT ORDER NO. IN ITEM 10A.
	B. THE ABOVE NUMBERED CONTRACT/ORDER IS MODIFIED TO REFLECT THE ADMINISTRATIVE CHANGES (such as changes in paying office, appropriation date, etc.) SET FORTH IN ITEM 14, PURSUANT TO THE AUTHORITY OF FAR 43.103(b).
	C. THIS SUPPLEMENTAL AGREEMENT IS ENTERED INTO PURSUANT TO AUTHORITY OF:
X	D. OTHER (Specify type of modification and authority) Unilateral Funding Modification

E. IMPORTANT: Contractor ☒ is not. ☐ is required to sign this document and return _____ copies to the issuing office.

14. DESCRIPTION OF AMENDMENT/MODIFICATION (Organized by UCF section headings, including solicitation/contract subject matter where feasible.)

DUNS Number: 829076913
Field Office Point of Contact: (b)(6),(b)(7)(C) 915-856-(b)(6),(b)(7)(C)
Alternate Field Office POC: (b)(6),(b)(7)(C) 915 856-(b)(6),(b)(7)(C)
Contracting Officer's Representative (COR): (b)(6),(b)(7)(C) (915) 834-(b)(6),(b)(7)(C)
Alternate COR: (b)(6),(b)(7)(C) (915) 834-(b)(6),(b)(7)(C)
Contracting Officer: (b)(6),(b)(7)(C) (202) 732-(b)(6),(b)(7)(C)
Contract Specialist: (b)(6),(b)(7)(C) (202) 732-(b)(6),(b)(7)(C)

This modification to the FY 17 Task Order is to provide additional funding for detention services for ICE detainees at the Otero County Processing Center under the provisions of the Otero County, New Mexico Intergovernmental Service Agreement (IGSA) EROIGSA-14-0001. Continued ...

Except as provided herein, all terms and conditions of the document referenced in Item 9 A or 10A, as heretofore changed, remains unchanged and in full force and effect.

15A. NAME AND TITLE OF SIGNER (Type or print) (b)(6),(b)(7)(C)	
15B. CONTRACTOR/OFFEROR (Signature of person authorized to sign)	15C. DATE SIGNED (Signature of Contracting Officer)

CONTINUATION SHEET

REFERENCE NO. OF DOCUMENT BEING CONTINUED
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NAME OF OFFEROR OR CONTRACTOR
COUNTY OF OTERO

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>The purpose of this modification is as follows:</p> <p>A. Provide funding in the amount of (b)(4) for Detention Services (CLIN 0001A).</p> <p>B. As a result, the obligated amount of this Task Order has increased:</p> <p>From (b)(4)</p> <p>By:</p> <p>To:</p> <p>The funding provided in this modification is the amount presently available for payment and allotted to this task order. The service provider agrees to perform to the point that does not exceed the total amount currently allotted to the items currently funded under this task order. The service provider is not authorized to continue to work on those item(s) beyond that point. The Government will not be obligated to reimburse the service provider in excess of the amount allotted to those item(s) for performance beyond the funding allotted.</p> <p>*****</p> <p>Exempt Action: Y Sensitive Award: SPII</p> <p>FOB: Destination</p> <p>Period of Performance: 02/01/2017 to 01/31/2018</p> <p>Change Item 0001a to read as follows (amount shown is the total amount):</p> <p>0001a Detention Services (b)(4)</p> <p>Bed Day Rate of (b)(4) as of October 3, 2017 and stated on P00009 of contract EROIGSA-14-0001.</p> <p>The amount for this CLIN has increased</p> <p>From: (b)(4)</p> <p>By: \$</p> <p>To: \$</p> <p>The quantity for this CLIN has increased:</p> <p>From: (b)(4)</p> <p>By:</p> <p>To:</p> <p>Accounting Info:</p> <p>(b)(7)(E)</p> <p>Continued ...</p>				5,365,103.10

CONTINUATION SHEET

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NAME OF OFFEROR OR CONTRACTOR

COUNTY OF OTERO

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>Funded: \$0.00</p> <p>Accounting Info:</p> <p>(b)(7)(E)</p> <p>Funded: (b)(4)</p> <p>*****</p> <p>Invoicing Instructions:</p> <p>Service Providers/Contractors shall use these procedures when submitting an invoice.</p> <p>1. Invoice Submission: Invoices shall be submitted in a .pdf format on a monthly basis via email to:</p> <p>Invoice.Consolidation@ice.dhs.gov</p> <p>Each email shall contain only one (1) invoice and the subject line of the email will annotate the invoice number. The emailed invoice shall include the 'bill to' address shown below:</p> <p>DHS, ICE</p> <p>Financial Operations - Burlington</p> <p>P.O. Box 1620</p> <p>ATTN: ICE-ERO-FOD-FEP</p> <p>Williston, VT 05495-1620</p> <p>Note: the Service Provider's or Contractor's Dunn and Bradstreet (D&B) DUNS Number must be registered in the System for Award Management (SAM) at https://www.sam.gov prior to award and shall be notated on every invoice submitted to ensure prompt payment provisions are met. The ICE program office identified in the task order/contract shall also be notated on every invoice.</p> <p>2. Content of Invoices: Each invoice submission shall contain the following information:</p> <p>(i) Name and address of the Service Provider/Contractor. Note: the name, address and DUNS number on the invoice MUST match the information in both the Contract/Agreement and the information in the SAM. If payment is remitted to another entity, the name, address and DUNS information of that entity must also be provided which will require Government verification before payment can be processed;</p> <p>(ii) Dunn and Bradstreet (D&B) DUNS Number;</p> <p>(iii) Invoice date and invoice number;</p> <p>(iv) Agreement/Contract number, contract line</p> <p>Continued ...</p>				

CONTINUATION SHEET

REFERENCE NO. OF DOCUMENT BEING CONTINUED

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NAME OF OFFEROR OR CONTRACTOR

COUNTY OF OTERO

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>item number and, if applicable, the order number;</p> <p>(v) Description, quantity, unit of measure, unit price, extended price and period of performance of the items or services delivered;</p> <p>(vi) Shipping number and date of shipment, including the bill of lading number and weight of shipment if shipped on Government bill of lading;</p> <p>(vii) Terms of any discount for prompt payment offered;</p> <p>(viii) Remit to Address;</p> <p>(ix) Name, title, and phone number of person to notify in event of defective invoice; and</p> <p>3. Invoice Supporting Documentation. In order to ensure payment, the vendor must also submit supporting documentation to the Contracting Officer's Representative (COR) identified in the contract as described below. Supporting documentation shall be submitted to the COR or contract Point of Contact (POC) identified in the contract or task order with all invoices, as appropriate. See paragraph 4 for details regarding the safeguarding of information. Invoices without documentation to support invoiced items, containing charges for items outside the scope of the contract, or not based on the most recent contract base or modification rates will be considered improper and returned for resubmission. Supporting documentation requirements include:</p> <p>(i) Firm Fixed Price Items (items not subject to any adjustment on the basis of the contractor's cost experience, such as pre-established monthly guaranteed minimums for detention or transportation): do not require detailed supporting documentation unless specifically requested by the Government.</p> <p>(ii) Fixed Unit Price Items (items for allowable incurred costs, such as detention and/or transportation services with no defined minimum quantities, stationary guard or escort services, transportation mileage or other Minor Charges such as sack lunches and detainee wages): shall be fully supported with documentation substantiating the costs and/or reflecting the established price in the contract and submitted in .pdf format.</p> <p>(iii) Detention Services:</p> <p>(1) Bed day rate;</p> <p>(2) Resident's/detainee's check-in and check-out</p> <p>Continued ...</p>				

CONTINUATION SHEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED EROIGSA-14-0001,/HSCEDM-17-F-IG138/P00007	PAGE	OF
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NAME OF OFFEROR OR CONTRACTOR
COUNTY OF OTERO

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>dates;</p> <p>(3) Number of bed days multiplied by the bed day rate;</p> <p>(4) Name of each detainee;</p> <p>(5) Resident's/detainee's identification information</p> <p>(iv) Transportation Services:</p> <p>(1) The mileage rate being applied for that invoice.</p> <p>(2) Monthly billing reports listing transportation services provided; number of miles; transportation routes provided; locations serviced and/or names/numbers of detainees transported; an itemized listing of all other charges; and, for reimbursable expenses (e.g. travel expenses, special meals, etc.) copies of all receipts.</p> <p>(v) Stationary Guard Services:</p> <p>(1) The itemized monthly invoice shall state the number of hours being billed, the duration of the billing (times and dates) and the name of the resident(s)/detainee(s) that was/were guarded.</p> <p>(vi) Other Direct Charges:</p> <p>The invoice shall include appropriate supporting documentation for any direct charge billed for reimbursement.</p> <p>4. Safeguarding Information: As a contractor or vendor conducting business with Immigration and Customs Enforcement (ICE), you are required to comply with DHS Policy regarding the safeguarding of Sensitive Personally Identifiable Information (PII). Sensitive PII is information that identifies an individual, including an alien, and could result in harm, embarrassment, inconvenience or unfairness. Examples of Sensitive PII include information such as: Social Security Numbers, Alien Registration Numbers (A-Numbers), or combinations of information such as the individual's name or other unique identifier and full date of birth, citizenship, or immigration status.</p> <p>As part of your obligation to safeguard information, the follow precautions are required:</p> <p>(i) Email supporting documents containing Sensitive PII in an encrypted attachment with password sent separately.</p> <p>(ii) Never leave paper documents containing Sensitive PII unattended and unsecure. When not in use, these documents will be locked in</p> <p>Continued ...</p>				

CONTINUATION SHEET

REFERENCE NO. OF DOCUMENT BEING CONTINUED

EROIGSA-14-0001,/HSCEDM-17-F-IG138/P00007

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NAME OF OFFEROR OR CONTRACTOR

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ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>drawers, cabinets, desks, etc. so the information is not accessible to those without a need to know.</p> <p>(iii) Use shredders when discarding paper documents containing Sensitive PII.</p> <p>(iv) Refer to the DHS Handbook for Safeguarding Sensitive Personally Identifiable Information (March 2012) found at</p> <p>(b)(4)</p> <p>for more information on and/or examples of Sensitive PII.</p> <p>5. If you have questions regarding payment, please contact ICE Financial Operations at 1-877-491-6521 or by e-mail at OCFO.CustomerService@ice.dhs.gov</p>				